

iMed Web MG User Guide

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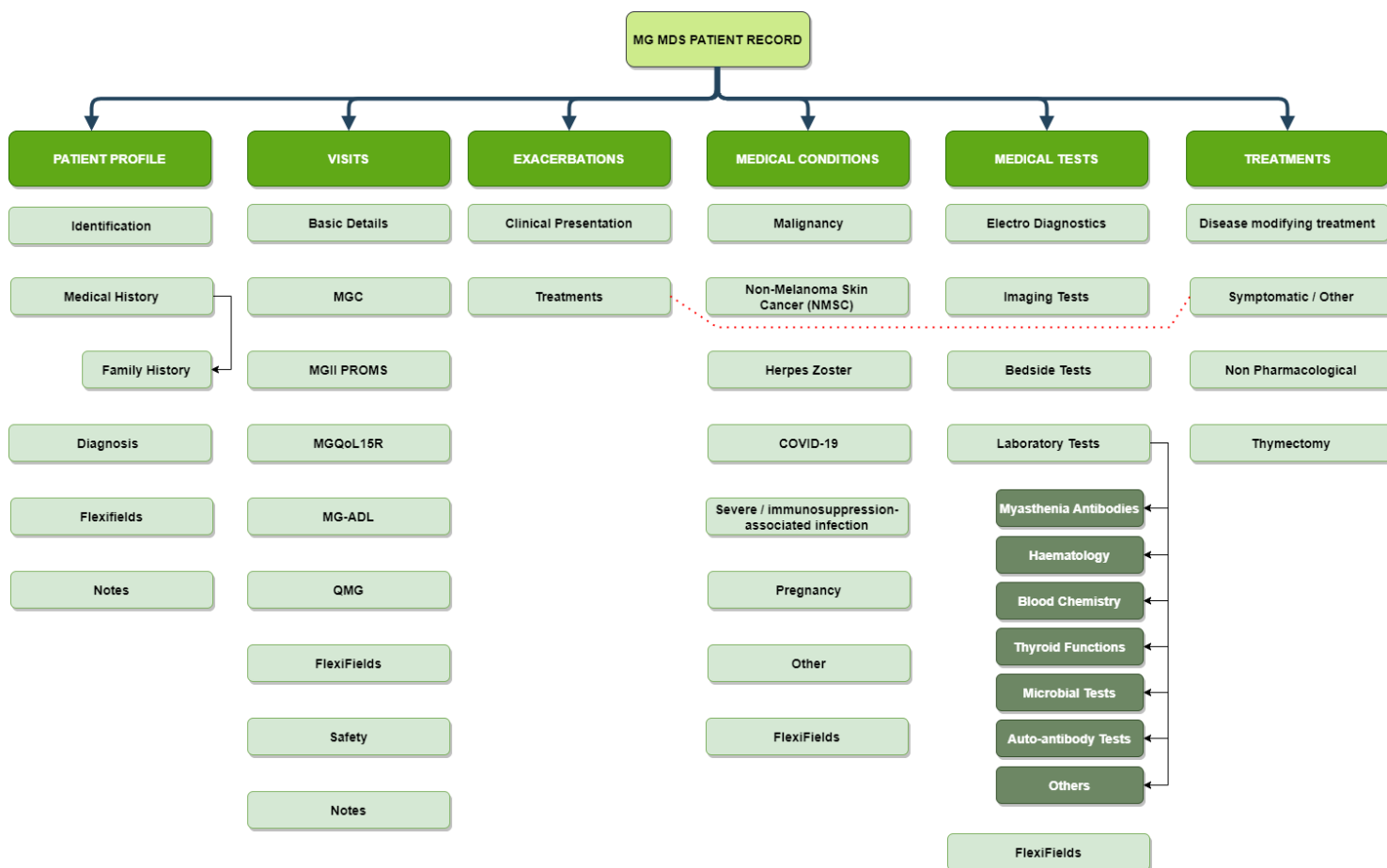
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1. User Guide Overview & Content Map

When working with iMed Web, it is important to familiarise yourself with the application's features and its relationship with the MGBase Registry.

This guide outlines the core capabilities of iMed Web and provides guidance on common user tasks, such as logging in and entering patient information, as well as more advanced functionality, including sub-study creation, search, and Flexifield administration.

Below is a content map that presents the iMed Web Patient Record in a hierarchical structure. It is organised into six major sections (modules), shown in dark blue, with each section further broken down into its associated data entry forms.



1. What is iMed Web?

iMed Web is a web-based SaaS platform designed to collect clinical data related to Myasthenia Gravis (MG). It is developed and maintained by the MSBase Foundation and is available exclusively to MSBase Members. iMed Web communicates with the MSBase/MGBase Registry/s and uploads a defined subset of patient data for consenting patients.

The MGBase Registry is an ongoing, longitudinal, strictly observational database that commenced in 2021. It provides a platform for international collaboration focused on sharing, tracking and evaluating outcomes data in Myasthenia Gravis (MG). Membership of the Registry is open to all practicing neurologists and their healthcare teams worldwide.

The MGBase Registry platform supports data collection for MG and NID studies at regional, national and global levels, with configurable sub-study functionality that enables filtering according to specific research themes.

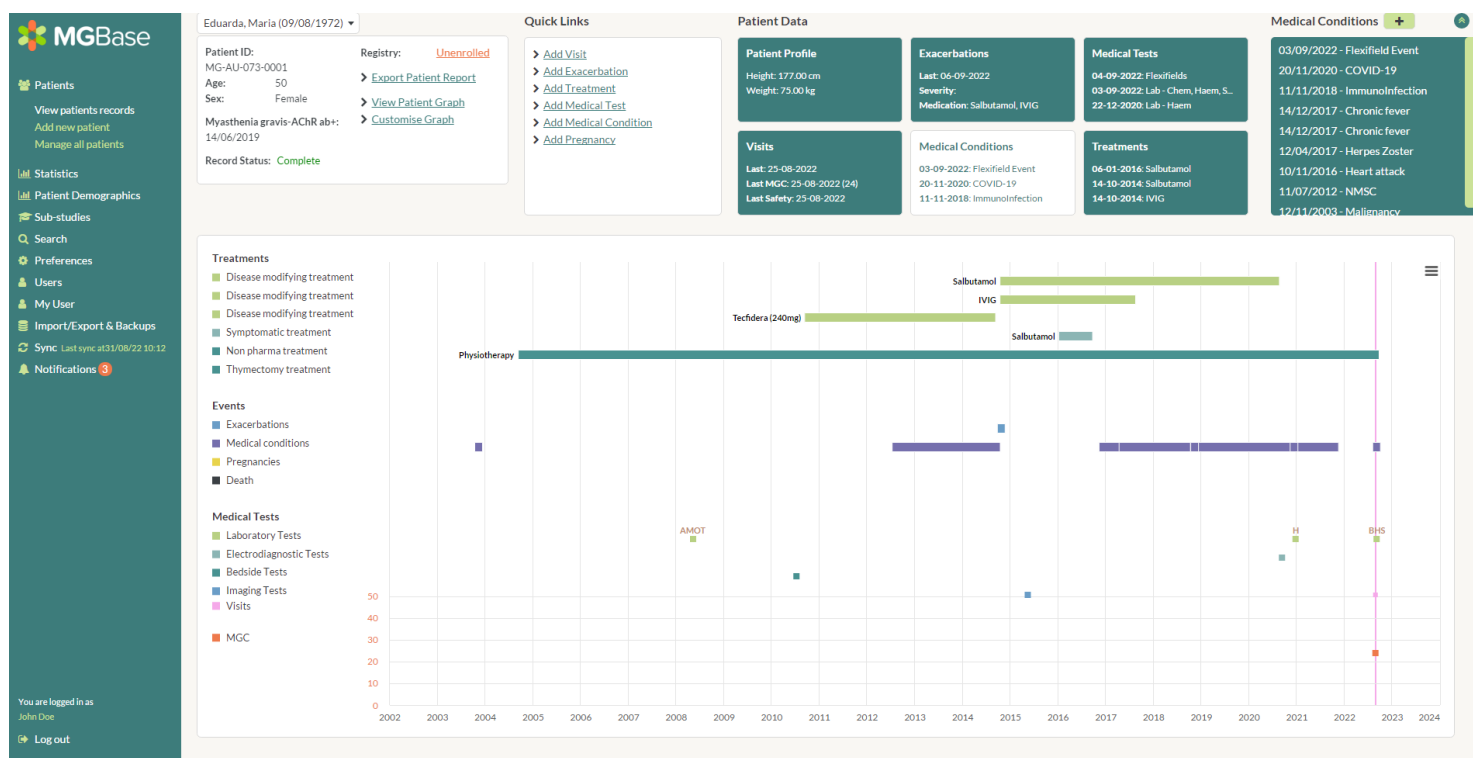


Figure 1 - The iMed Web Application

2. Before you start

2.1. Are you a MGBase Registry member?

To use iMed Web you must be a member of the MGBase Registry.

You are considered a member if:

- You are a Principal Investigator (PI) who has been approved by the MGBase Operations team, or
- You have been invited by your centre's PI or Co-PI.

If you are not a member of the MGBase Registry, please stop here and sign up at: www.mgbase.org

2.2. Have you forgotten your password?

If you were previously a member and can no longer log in, please reset your password at www.mgbase.org/forgot-password.

Your username will be your institutional email address.

If your site is configured to use Microsoft Entra ID, select Log in with Entra on the login screen.

If you are unsure which login method applies to your site, or if you experience issues logging in please contact MGBase support via <https://www.mgbase.org/contact-us/>.

3. iMed Web Overview

3.1. Log in

Launch iMed Web by navigating to your sites unique URL. If you are unsure contact your Principal Investigator.

You will be presented with the login screen. Enter your username (institutional email address) and password, then select Log In to proceed.

If your site is configured to use Microsoft Entra ID, select Log in with Entra ID and follow the on-screen prompts to authenticate.



Figure 2 App Selector Screen

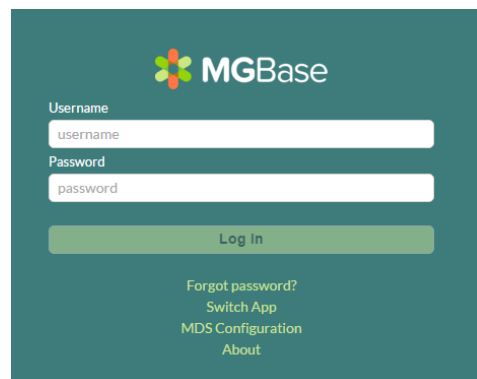


Figure 3 - iMed Web Login screen

3.2. Basic Navigation

Your iMed Web home screen will resemble the below image. The interface is divided into seven regions:

- **iMed Web Menu:** Navigate the main sections of iMed Web, such as Statistics, Patient Demographics, Sub-studies and Search, by selecting the relevant menu item.
- **Patient Selector:** Select, change, or search for a specific patient.
- **Patient Card:** View an overview of the selected patients and access patient-specific functions.
- **Quick Links:** Access commonly used actions from the Quick Links sections.
- **Category Selector:** Access data entry forms by selecting one of the six category buttons. The available options in the Context Menu update based on the selected category.
- **Context Menu:** Displays options related to the selected category. For example, selecting Patient Profile displays Identification and Medical History forms, while selecting Visits displays all visits recorded for the selected patient.
- **Patient Overview Graph:** Provides a graphical overview of the patient's clinical history and recorded events.

3.1. Patient Selector

To switch between patients, use the Patient Selector. Your centre may have hundreds or even thousands of patients and locating a patient by scrolling alone may be time-consuming. To find a patient more quickly, select the Patient Selector and begin by typing the first few letters of the patients first or last name. This list will automatically narrow to a more manageable set of results.

If a patient is deleted from iMed Web, they will no longer appear in the Patient Selector.

If you have performed a search or applied a filter in the Statistics section, the Patient Selector will display only those patients that meet the active search or filter criteria

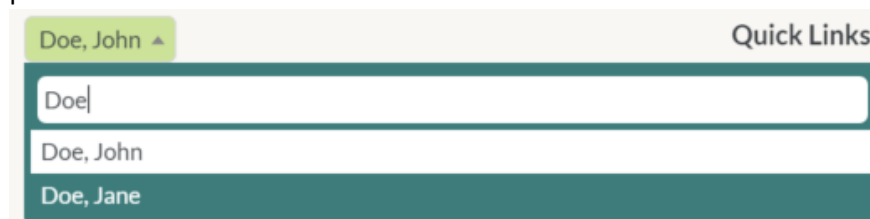
The image shows a user interface for a patient selector. At the top, there is a header bar with 'Doe, John' on the left and 'Quick Links' on the right. Below this is a search input field containing the text 'Doe'. A dropdown menu is open below the search field, displaying two suggestions: 'Doe, John' and 'Doe, Jane'. The dropdown menu has a light blue background and a dark blue border.

Figure 4 - Patient Selector and Search

Good to know!

The Patient Selector dropdown menu is limited to 1,000 patients to maintain optimal performance. If you have more than 1,000 patients, please use the filter function to locate specific patients, or alternatively, access the patient through the Manage All Patients section.

3.2. Recommended Minimum Data Set

4. The MGBase Registry recommends—but does not mandate—a minimum patient data set for submission. Supplying this helps improve the quality of registry information and research. Details of the minimum data set are outlined below.

Records are considered complete when the fields in **red text** in the table below have been filled.

Fields that are **not** in red text, are all fields that are *recommended* to complete annually, for the purposes of capturing quality data.

Section	Field	Frequency	Definition
Patient profile	Patient ID	Entry visit	Patient globally unique ID
	Last name	Entry visit	
	First name	Entry visit	
	Gender	Entry visit	
	Birth date	Entry visit	
MG Diagnosis	Disease category	Entry visit	Disease names
	Date of onset	Entry visit	Date
Visit	MRS	Annual #	Value
	MGC	Annual #	Total
	MGC		With scores
	MGFA		Value
	MGFA PIS		Value
	MG-ADL		Total
	MG-ADL		With scores
Paraclinical tests	Test date	If entered	Date
Exacerbation	Date of onset	If entered	Date
	Symptoms	If entered	Symptom names
	Treatment site	If entered	Value
Treatment	Treatment type	If entered	Treatment names
	Start date	If entered	Date
	End date	If entered	Date

Good to know!

A patient may be uploaded to the Registry even if the minimum dataset requirements are not fulfilled; however, the Patient Card will display a notification indicating that the patient record is *Incomplete*.

4.1. Mandatory Fields and Field Validation

Some forms in iMed Web contain mandatory fields that must be completed before the form can be saved. Examples include a patient's First Name and Last Name, or the date of a visit. Mandatory fields are indicated by a blue highlight and will trigger an alert message if left blank when you attempt to save the form.

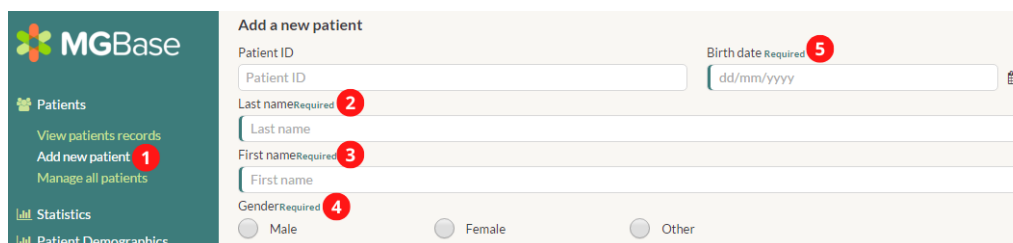


Figure 6 Mandatory Field Figures

In addition, iMed Web applies field validation rules and may prevent a form from being saved, or display a warning, if invalid data is entered. Common validation examples include:

- Field length: Certain fields restrict the number of characters that can be entered.
- Impossible dates: iMed Web will not accept dates that are logically invalid, such as a medical event recorded after a patient's date of death.

- Number Parsing: Some numeric fields do not allow negative values or enforce limits on decimal places.

If any validation rule is breached, iMed Web will display an appropriate error message to guide the user.

MGBase

Patients

View patients records

Add new patient

Manage all patients

Statistics

Patient Demographics

Add a new patient

Patient ID

Patient ID

Birth date Required

dd/mm/yyyy

Last nameRequired

Last name

Last name is required

First nameRequired

First name

First name is required

GenderRequired

Male

Female

Other

A gender is required

There are some errors in the form, please correct them

Home p

Home

Other n

Other

Email

Email

Status

Activ

Figure 7 Field Validation Example

5. Preferences

You can use the iMed Web Preferences section to configure your iMed Web installation for your Centre. This includes general settings—such as enforcing the use of MedDRA classification—as well as centre-specific configuration options, including the management of Care Professionals, the creation of MG-specific treatments, and the maintenance of reference data such as custom flexifields.

These preferences are described in detail in the sections below.

5.1. Centre Information

The centre information section allows you to update details about your Centre. This feature is available only when an active internet connection is present.

The screenshot shows the 'My Centre' configuration page in the MGBase application. On the left is a dark teal sidebar with a menu containing: Patients, Statistics, Patient Demographics, Sub-studies, Search, Preferences (marked with a red '1'), Center information (marked with a red '2'), Family relationship, Ethnic origin, Other medical conditions, Disease Modifying Treatments, Symptomatic treatments, Non-pharmacological treatments, Care professionals, Flexifields, About, Users, My User, Import/Export & Backups, Sync (Last sync at 31/08/22 10:12), and Notifications (marked with a red '3'). The main content area is titled 'My Centre' and contains two columns of form fields. The left column includes: Hospital (text field with 'UAT MG Centre'), Department (text field with 'MG'), Street Address (text field with '99 Commercial Road'), City (text field with 'Melbourne'), Country (dropdown menu with 'Australia'), and Postal Code (text field with '3004'). There is a checkbox for 'Mailing address different'. The right column includes: Mailing address 1, Mailing address 2, Mailing street, Mailing City, Mailing Country (dropdown menu with 'Select an option'), Mailing Postal Code, Primary Phone (text field with '+61 3 9903 8264'), and Fax (text field with '+61 3 9903 8264'). At the bottom of the form is a 'Comments' text area. Below the form fields is a 'Visit Assistant' section with the text 'Enforce users to create new visits by using the visit assistant?' and a 'No' radio button. At the very bottom are 'Save' and 'Cancel' buttons. The bottom of the sidebar shows 'You are logged in as John Doe' and a 'Log out' link.

Figure 8 - Centre Information modification

5.2. Family Relationships

The list of family relationship types (for example, son, daughter, father, mother) between patients can be modified to allow familial events to be captured in greater detail. The default values, however, are sufficient for most use cases.

To add a new family relationship, select Add, enter the new relationship, and select the Save icon.

The screenshot shows the 'Family relationship' configuration page in the MGBase application. The sidebar is identical to the previous screenshot, with 'Family relationship' (marked with a red '2') selected in the menu. The main content area is titled 'Family relationship' and has an 'Add' button (marked with a red '3') in the top right. Below the title is a list of existing relationship types: Brother, Children, Daughter, Distant, Dizygotic twin, Father, Monozygotic twin, Mother, Other, Parents, Siblings, Sister, Son, and Twins. At the bottom of the list is a text input field labeled 'My New Relationship' (marked with a red '4'). To the right of this field are three icons: a red circle with a white '5', a green square with a white '6', and a green square with a white '7'. The bottom of the sidebar shows 'You are logged in as John Doe' and a 'Log out' link.

Figure 9 - Adding a new family relationship type

5.3. Ethnic Origin

Additional Ethnic Origin types can be added where the default values are not sufficient.

To add an Ethnic Origin, select Add, enter the new value, and select the Save icon.

Figure 10 - Adding a new ethnic origin type

5.4. Other Medical Conditions

iMed Web uses two methods to identify adverse events and other medical conditions. The first, and preferred, method is the use of MedDRA. MedDRA is a hierarchical medical event classification schema that enables standardised data entry.

The alternative option is a list of Centre Medical Conditions, which can be customised for each site.

This section allows the centre to enforce the use of MedDRA only, or alternatively to allow the use of both MedDRA and

Centre Medical Conditions. Make the appropriate selection in the section below.

Figure 11 - MedDRA only can be enforced in iMed Web

Good to know!

We recommend *MedDRA only* to ensure medical condition coding is standardised. For more information, refer to the MedDRA section within this document.

If you are migrating data from an existing database, you may already have Centre Medical Conditions defined. If MedDRA only is selected, these Centre Medical Conditions will be retained. You can either leave these records unchanged or recode them into MedDRA format.

To add a Centre Medical Condition that users can select, select Add, enter the medical condition, and select the Save icon.

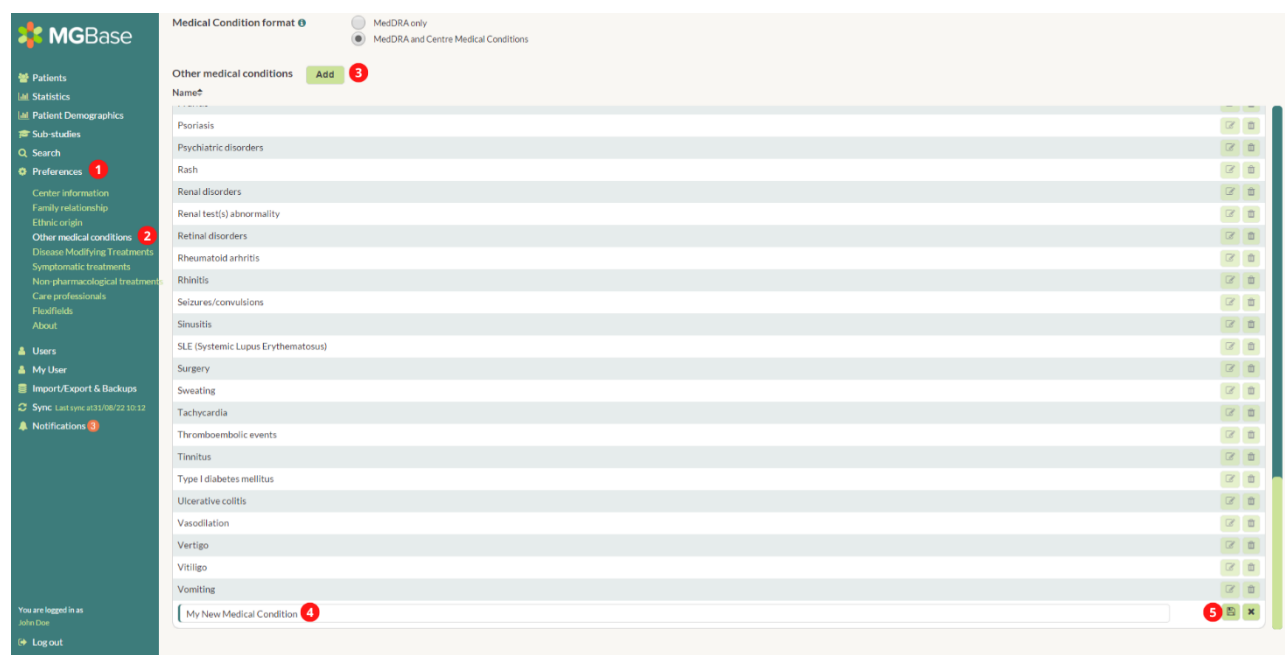


Figure 12 Adding Centre Medical Conditions

5.5. MG Specific Treatments

Treatments are handled differently in iMed Web depending on whether they are a DMT/MG Specific treatment, a Symptomatic treatment, or a non-Pharmacological treatment.

iMed Web is installed with a set of default MG Specific treatments, where the name and dosage of these values are standardised. For alternative dosage variations, or for drugs not listed as a default treatment, the user is able to add a treatment.

**Good to know!**

When a treatment is assigned to a patient, the default values are applied by default; however, the dosage can be adjusted for the individual patient if required.

The default treatments and dosages are shown in the adjacent image.

Disease modifying treatments Add						
Classification?	Name?	Dose?	Unit?	Period?	Route?	
Purine synthesis inhibitor	Azathioprine	0	mg	Daily - bd	PO	
Alkylating agent	Cyclophosphamide		mg	Monthly	IV	
Calcineurin inhibitor	Cyclosporin		mg	Bd	ORAL	
Corticosteroids	Dexamethasone					
Complement inhibitor	Eculizumab		mg	Weekly - every 4 weeks	IV	
	Hydrocortisone					
Immunoglobulin	IVIg		g	/ Day	IV	
Methotrexate	Methotrexate		mg	/ Week	ORAL	
	Methylprednisolone					
Purine synthesis inhibitor	Mycophenolate mofetil		mg	Bd	PO	
Purine synthesis inhibitor	Mycophenolate sodium		mg	Bd	PO	
Procedure	PLEX (Plasma exchange)	0	Episodes	Daily through to every 8 weeks	IV	
	Prednisolone					
Corticosteroids	Prednisone		mg	Daily or bd	ORAL	
Anti-CD20 monoclonal antibody	Rituximab		mg	Single episodes	IV	
Immunoglobulin	Subcutaneous immunoglobulin (SCIG)		g	Daily through to every 8 weeks	SC	
Calcineurin inhibitor	Tacrolimus		mg	Bd	ORAL	

Figure 13 - MG Specific Treatments

To add a treatment, select Add, enter the generic name, common name, and dosage details, then select the Save icon.

Figure 14 - Entering MG Specific Treatment type

5.6. Symptomatic Treatments

A set of default Symptomatic treatments are provided with iMed Web. An example of these are captured below.

C ⁺	Name ⁺	Dose ⁺	Unit ⁺	Period ⁺	Route ⁺
☐	3,4-diaminopyridine (34DAP)				
☐	4-aminopyridine				
☐	Cortisone acetate				
☐	COVID Vaccine - AstraZeneca (ChAdOx1-SARS-CoV-2)			Single Dose	IM
☐	COVID Vaccine - BioNTech/Pfizer (BNT162b2)			Single Dose	IM
☐	COVID Vaccine - Gamaleya/SputnikV (Gam-CovId-Vac)			Single Dose	IM
☐	COVID Vaccine - Janssen-Cilag/Johnson&Johnson (Ad26.COV2.S)			Single Dose	IM
☐	COVID Vaccine - Moderna (mRNA-1273)			Single Dose	IM
☐	COVID Vaccine - Novavax (NVX-CoV2373)			Single Dose	IM
☐	COVID Vaccine - Other			Single Dose	IM
☐	COVID Vaccine - SinoVac (CoronaVac)			Single Dose	IM
☐	Diazepam (2mg)	2	mg	/ Day	OTHER
☐	Neostigmine				
☐	Pyridostigmine				
☐	Salbutamol				

Figure 15 - Example of default treatment types

Should you need to add additional treatments to the default, simply click the **Add** button, enter the details, and then click save. iMed Web requires corticosteroids to be identified using the checkbox on the far left. This allows the treatment to be assigned to the Corticosteroid field when creating a relapse.

Figure 16 Adding a Treatment

5.7. Non-pharmacological treatments

In iMed Web non-pharmacological treatments are classified differently to the Disease Modifying Treatments and Symptomatic treatments above.

iMed Web is shipped with the below default non-pharmacological treatments. Like the above treatments, there is also the ability to add and modify the pharmacological treatments.

To add a non-pharmacological treatment, select Add then enter and save the treatment type.

Name ⁺
Occupational Therapy
Physiotherapy
Psychotherapy
Yoga

Figure 17 Adding Non-Pharmacological Treatments

5.8. Care Professionals

The Care Professionals section in iMed Web enables the centre to identify GP's and other practitioners that constantly refer patients to the centre.



Good to know!

The Care Professionals section is used in the patients "Referred By" field. This functionality is not required by MGBase Minimum Dataset or uploaded to the Registry and is at the discretion of the user to enter.

To add a Care Professional, click the Add button and then fill in the details for the Care Professional.

Care professionals Add			
Last name ↕	First name ↕	Title ↕	Function ↕
John	Doe	Dr	Neurologist
Jane	Doe	Dr	Neurologist

Figure 19 - Care professional list

Add a new care professional

First name Firstname	Location High St Medical
Last name Lastname	Phone number 1234 5678
Title Dr	Mobile number 1234 5678
Function General Practitioner	E-mail address test@gmail.com
Other 	Address 123 High St, South Yarra
Remarks 	

Save Cancel

Figure 20 - Care professional data form

5.9. Flexifields

5.9.1. Overview

Flexifields are data fields in addition to the standard fields that iMed Web captures as a default. For example, your centre may want to capture supplement use, or administrative fields that are unique to your centre for internal or research purposes.



Good to know!

Centre-specific Flexifields are a great way to capture unique fields about your centre's patients. They are not shared with the Registry and can still be exported, searched on and graphed like any other field in iMed Web.

Further information about flexifields and iMed Web:

- Flexifields can be entered as a one-off data field (for example Health Insurance Number) or can be entered as a time series value (for example Vitamin D level).
- **Centre-specific Flexifields** are never shared with the Registry or any other centre. They will never leave your centre, so they may be used to capture personally identifiable information, or other confidential information.
- There are different types of fields. For example, numeric fields can be used to capture dosages, text fields can be used to capture brief comment, or drop-down boxes may be used to enforce consistent data entry.
- Flexifields belong to you. We therefore allow flexifields to be exported to either XLSX or CSV.
- Numeric time-series flexifields can be displayed on the Patient Overview Graph.
- Flexifields can be searched just like any other field in iMed Web.

In the below example we have created a flexifield form in the Visit section. This means that the below data could be captured and recorded over many different time points. Note that the flexifields capture clinical information as well as administrative information.

FlexiFields

01 - Administrative

02 - Schedule Next Visit

☒

03 - Preferred Time for Next Visit

Mid December 2017

04 - Patient Well-being

05 - Mood of Patient (Self-Assessed)

Good

06 - Mood of Patient (Comments)

Patient is in good spirits.

Save

Cancel

Figure 21 - Flexifield example

5.9.2. Data types

There are seven different types of fields in MGBase that you can use as flexifields. These are further explained below.

- **Checkbox:** A checkbox can be used to identify True or False values. For example, Patient Consent, whether to book another appointment etc. A checkbox cannot be graphed, but it can be searched as “Yes” or “No”.
- **Date:** A date field is used to capture a specific date. The date must be valid and contain a day, month and year. Where dates are abstracted to month or year only, then either use an arbitrary day value, or use the Text field instead. When searching the date fields then the = < > operators may be used.
- **Dropdown:** Where the centre wishes to promote standardised answers, the dropdown option may be used. For example, a field may be “Mood of patient”, with the dropdown options including “Excellent”, “Good”, “Mediocre”, “Bad”, “Terrible”. This field cannot be graphed but can be searched.
- **Header:** The header field allows you to organise your fields into different sections.
- **Numeric:** The numeric field allows numbers up to 20 digits to be captured. This field is searchable and graphable if used in Visits, Medical Events or Paraclinical Tests.
- **Text:** The text field should be used to capture short, simpler alphanumeric values. For example, it might be used to store a name, a phone number or an insurance reference. The field can be searched but not graphed.
- **Text Area:** A Text Area field is like a text field but instead should be used for longer text. For example, capturing notes about a patient. The field can be searched but not graphed.

Field Type	Unit	Max Length/Format
Checkbox	No	N/A
Date	No	DD/MM/YYYY
Dropdown	No	N/A
Header	No	N/A
Numeric	Yes	N/A
Text	No	100 Characters
TextArea	No	100 Characters

When adding a field to the Flexifield section, first decide what category it should fall into. There are four options available:

- Patient Profile: Flexifields in this section should only be used to capture once off data about the patient. This section should not be used for time-series values. Examples of use include: Patient Insurance Reference, Consent to Upload to use data for research, Hair colour etc.
- Visits: Flexifields in the visits section can be used for time-series values. These are values that can change overtime. For example, this might be some type of centre administration field identifying when the next MRI should be.
- Medical Tests: Medical tests can be created to capture time-series test outcomes. For example, this may be a custom disability scale being assessed for efficacy.
- Medical Events: Medical event flexifields are used to capture time-series custom medical events. Like Paraclinical Tests, this section can be used to create a custom data collection form for medical events. For example, the centre you are working in may be collecting data on pregnancies in addition to the fields being collected in the current Pregnancy form. This collection would be performed in the Medical Events section.

Flexifields Add

Patient Profile		Visits	Medical Tests		Medical Events
Name	Type	Unit	Mini	Maxi	
01 - Administrative	Header				 
02 - Schedule Next Visit	Checkbox				 
03 - Preferred Time for Next Visit	Text				 
04 - Patient Well-being	Header				 
05 - Mood of Patient (Self-Assessed)	Text				 
06 - Mood of Patient (Comments)	TextArea				 

Figure 22 - Flexifield administration screen

Once you have decided where the fields you wish to collect should go then create the flexifield by clicking the Add button and populating the remainder of the fields. Once the flexifield is saved, save your changes.

 **Good to know!**

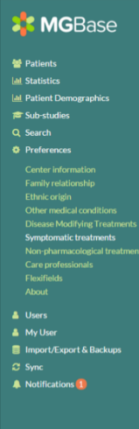
Flexifields will sort alphanumeric by fieldname as a default. To force an order, prefix them with a number like the above example.

5.10. Deleting Reference Data

There may be instances where you wish to delete reference data. This might be a field value that is no-longer used, or it might be multiple fields that you wish to consolidate into a single field. iMed Web will not allow values to be orphaned, so when deleting reference data that already has patients associated with it, iMed Web will require you to assign the deleted value to an existing value.

For example, in the below we would like to delete the treatment Hydrocortisone.

MSBase MDS v1.5.57



Symptomatic treatments Add

C*	Name*	Dose*	Unit*	Period*	Route*	
☐	3,4 diaminopyridine (34DAP)					
☐	4 aminopyridine					
☐	Cortisone acetate					
☐	COVID Vaccine - AstraZeneca (ChAdOx1-SARS-CoV-2)			Single Dose	IM	
☐	COVID Vaccine - BioNTech/Pfizer (BNT162b2)			Single Dose	IM	
☐	COVID Vaccine - Gamaleya/SputnikV (Gam-CovId-Vac)			Single Dose	IM	
☐	COVID Vaccine - Janssen-Cilag/Johnson&Johnson (Ad26.COV2.S)			Single Dose	IM	
☐	COVID Vaccine - Moderna (mRNA-1273)			Single Dose	IM	
☐	COVID Vaccine - Novavax (NVX-CoV2373)			Single Dose	IM	
☐	COVID Vaccine - Other			Single Dose	IM	
☐	COVID Vaccine - SinoVac (CoronaVac)			Single Dose	IM	
☐	Diazepam (2mg)	2	mg	/ Day	OTHER	
☐	Hydrocortisone		mcg	Other	OTHER	1  
☐	Neostigmine					
☐	Pyridostigmine					
☐	Salbutamol					

Figure 23 Deleting Reference Data

There are two scenarios that can occur when deleting data, either the treatment has never been used in iMed Web and you can simply delete, or the treatment has been used and you need to delete and replace.



Good to know!

What happens if we have already treated a patient with “Hidrocortisone”? If you were to delete that treatment, then we would have an empty treatment name associated with the patient, but still have a dosing schedule, duration, and notes. In this instance you need to Replace and Delete. iMed Web will prompt you with which treatment you wish to replace the deleted treatment with. In this example, we replace all records referring to Hidrocortisone with Hydrocortisone and then delete the Hidrocortisone reference.

This happens to not just Disease Modifying Treatments, but also Symptomatic Treatments, Family Relationships, Ethnic Origin and non-Pharmacological treatments.

6. MedDRA

6.1. What is MedDRA?

MedDRA is the preferred method for capturing medical conditions in iMed Web. It is an internationally recognised and clinically validated medical terminology dictionary used across the medical and pharmaceutical industries. MedDRA is available in multiple languages, including English, Chinese, Czech, Dutch, French, German, Hungarian, Italian, Portuguese, Spanish, and Japanese, and is widely used worldwide for pre-marketing and post-marketing safety activities.

6.1. Structure of MedDRA

MedDRA is structured as a hierarchical tree, organised by System Organ Class (SOC) and further divided into High-Level Group Terms (HLGT), High-Level Terms (HLT), Preferred Terms (PT), and finally Lowest Level Terms (LLT). When assigning a medical condition to a patient, selection is made at the LLT level, and only LLT values are available for entry.

In the example below, a patient is classified as having Sleep Apnoea. When searched, the relevant LLT is returned and can be selected. Each LLT belongs to a corresponding PT, and LLTs can be considered synonymous terms for that PT. In this case, any of the available LLT terms would be correctly classified under the PT Sleep Apnoea Syndrome.

MedDRA PT terms may belong to more than one hierarchy, a characteristic known as multiaxiality. As shown in the example below, Sleep Apnoea may be classified not only as a respiratory disorder, but also as a psychiatric or nervous system disorder. As a result, when searching in iMed Web, a PT may be returned for multiple SOC-based searches.

For reporting and display purposes, iMed Web uses MedDRA's primary hierarchy, in which only a single SOC is applied. The primary hierarchy is defined by MedDRA, ensures consistency, and prevents "double counting" of medical conditions. In the diagram below, the primary hierarchy for Sleep Apnoea is shown in red.

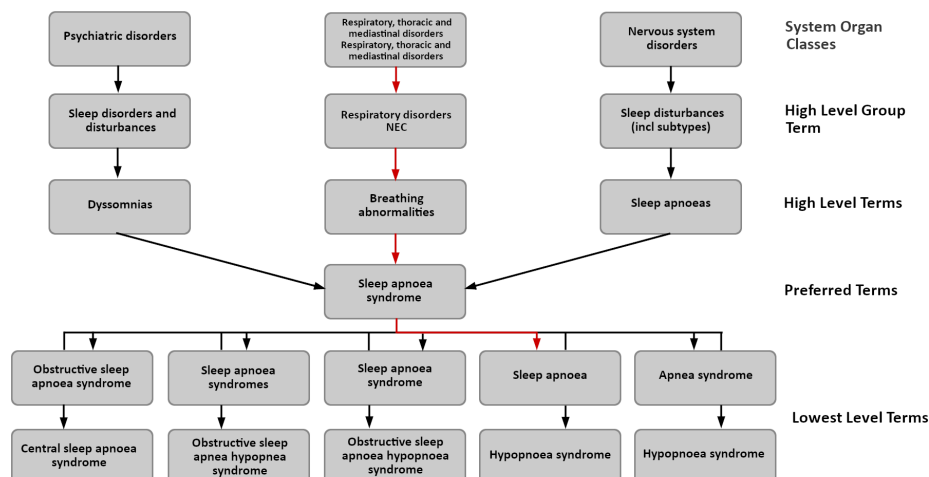


Figure 24 - MedDRA hierarchy for Sleep Apnoea

6.1.1. Browsing MedDRA

MedDRA definitions can be applied to a patient either by browsing and selecting a Lowest Level Term (LLT) or by searching directly for an LLT. To browse, expand the hierarchy by selecting the SOC, HLGT, HLT, and PT levels. Once the appropriate LLT is located, select and save the entry.

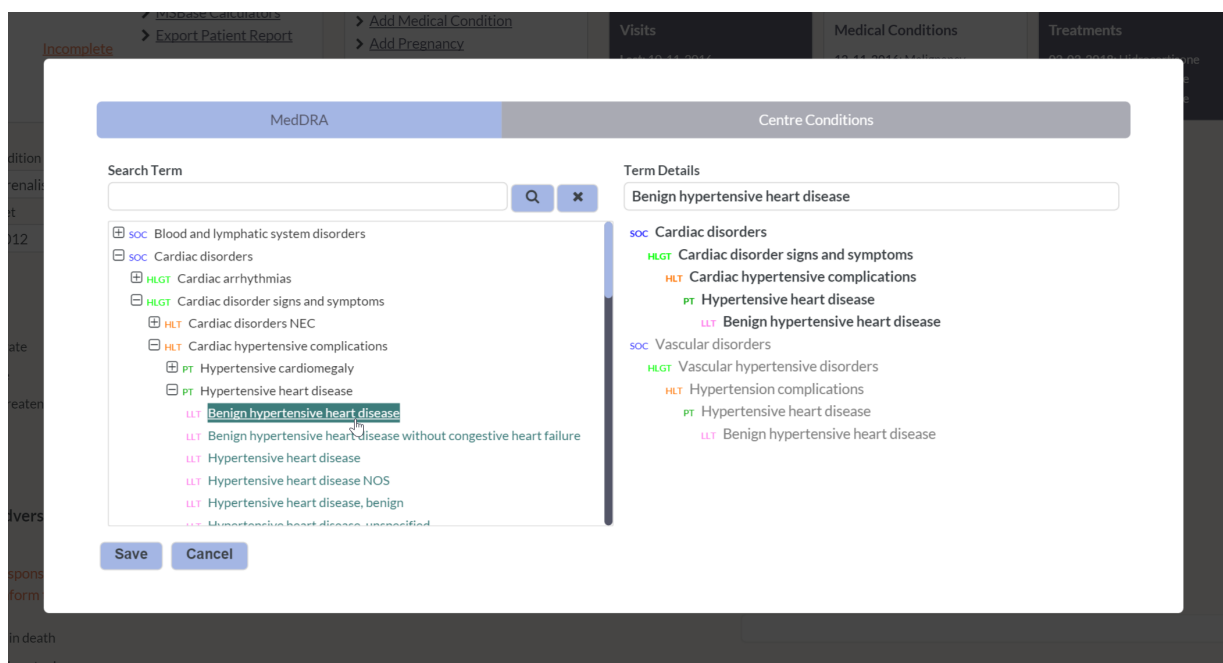


Figure 25 - Browsing with MedDRA

6.1.2. Searching

Searching MedDRA is a more efficient method for locating a Lowest Level Term (LLT) when the condition is known. Enter a search phrase and select the Search icon. iMed Web will return the closest matching LLT and rank results by relevance. Select the appropriate LLT and save to assign it to the patient.

If no LLT is returned, check the spelling of the search term or try a less specific search. Alternatively, refer to the section above and browse the MedDRA hierarchy to locate the required LLT.

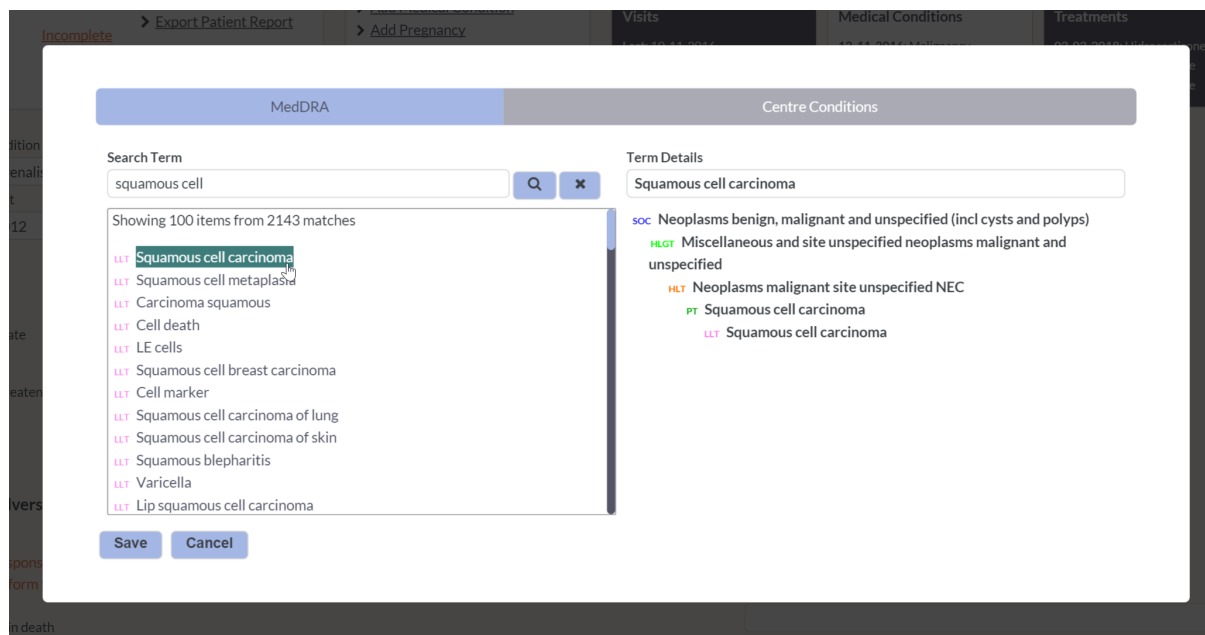


Figure 26 -Searching for an LLT

7. Patients

7.1. Adding a new patient

To add a patient in iMed Web, expand the Patients option in the iMed Web menu and select Add new patient. Ensure all mandatory fields are completed before selecting Create Patient. Once the patient has been created, Visits, Treatments, Medical Events, and other records can be added as required.

Good to know!

After the patient is created, they are not yet enrolled in the MSBase Registry. The patient can be enrolled either via the Manage All Patients section or by selecting the Registry **[Unenrolled]** button in the Patient Card, which will then update to **[Enrolled]**.

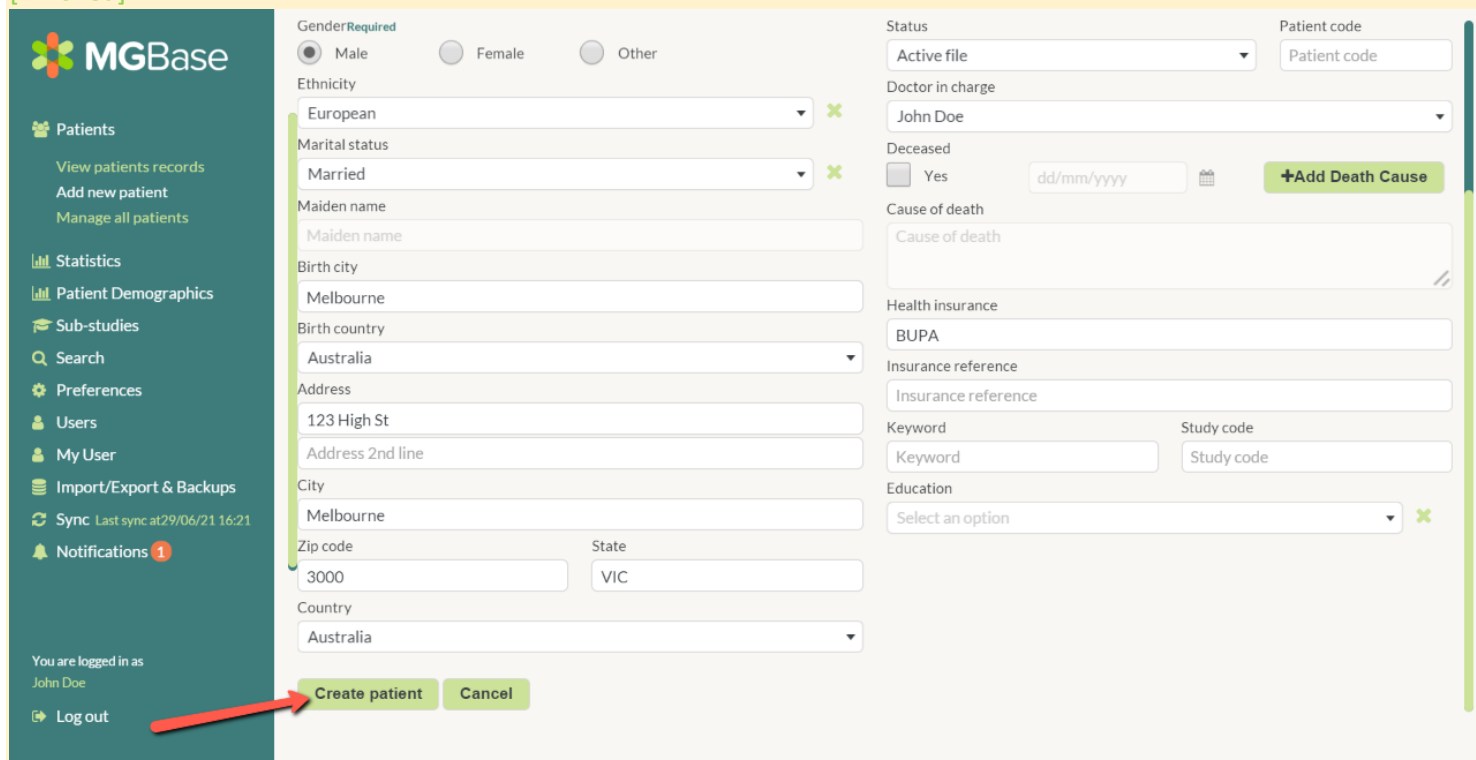


Figure 27 - Adding a patient

7.2. Manage all patients

The Manage All Patients screen provides a high-level view of patients and supports bulk actions. For example, this screen can be used to enrol multiple patients into the Registry. Additional functions available in this screen include:

- Check Completeness: Identifies patients with incomplete records. Select Fix to view incomplete elements. If no Fix option is displayed, the patient record is complete.
- Enrol/Unenrol: Enables identification of patients who are not yet enrolled in the Registry and supports enrolment actions, which are otherwise typically performed on an individual basis.
- Delete/Restore: Allows patients to be removed from iMed Web, for example where a record is a duplicate or the patient no longer attends the clinic. iMed Web performs a soft delete only, meaning the patient record can be restored if required. Deleted patients do not appear in the Patient Selector.

Navigation within the Manage All Patients screen is limited to sorting by column values. For more detailed analysis, patient data should be exported to Excel or CSV format.

- Patients
 - View patients records
 - Add new patient
 - Manage all patients
- Statistics
- Patient Demographics
- Sub-studies
- Search
- Preferences
- Users
- My User
- Import/Export & Backups
- Sync Last sync at 29/06/21 16:21
- Notifications 1

You are logged in as
John Doe

Log out

Manage all patients

Deleted patients

Page 1

Patient ID	Last name	First name	Birth Date	Completeness	Enrolled	Delete/Restore
MG-AU-073-0001	Doe	John	18/06/2021	Fix	Yes	
MG-AU-073-0002	Doe	Jane	17/06/1964		Yes	
MG-AU-073-0003	Waller	Timothy	11/03/1971	Fix	No	

Page 1

Figure 28 - Manage all patients screen

7.3. Deleting a patient

When a patient is deleted, they are not permanently removed from the system. Instead, the record is soft-deleted. This means the patient is excluded from synchronisation events, no longer appears in search results, and is removed from the Patient Selector list.

Soft-deleted patients are identified in the Patient Management screen by an orange exclamation mark (!). The record can be restored at any time by selecting the restore button (↺).

Manage all patients

Deleted patients

Page 1

Patient ID	Last name	First name	Birth Date	Completeness	Enrolled	Delete/Restore
MG-AU-073-0001	Doe	John	18/06/2021	Fix	Yes	
MG-AU-073-0002	Doe	Jane	17/06/1964		Yes	
MG-AU-073-0003	! Waller	Timothy	11/03/1971			↺

Page 1

Figure 29 - Restoring a deleted patient

7.4. Patient Card (Record)

When a patient is selected in iMed Web, the Patient Card (Record) displays a summary of the patient and provides access to a limited set of actions. The following functions are available:

- **Check patient completeness:** Review whether the patient's record is complete and meets the MSBase recommended completeness criteria.
- **Check Registry enrolment:** View the patient's Registry enrolment status and enrol the patient if they are not already enrolled.
- **Manage sub-studies:** View the sub-studies the patient is enrolled in and enrol the patient into additional sub-studies that require manual enrolment.
- **MSBase calculators:** Access patient-specific calculators and prediction models (coming soon).
- **Export patient report:** Export the patient report in PDF or RTF format for printing or filing.
- **View patient graph:** Open the Patient Overview Graph.
- **Customise graph:** Customise the Patient Overview Graph display.

MSBase

Abazu, Shawny [Demo]

Patient ID: AU-059-1210 Registry: **Enrolled**

Age: 62 MSBase Sub-studies

Sex: Female Eligible: 1 Enrolled: 10

CIS: 08/07/2011

SP: 02/07/2001

Record Status: **Incomplete**

> [Manage Sub-studies](#)

> [MSBase Calculators](#)

> [Export Patient Report](#)

> [View Patient Graph](#)

> [Customise Graph](#)

MGBase

Doe, John

Patient ID: MG-AU-073-0001 Registry: **Enrolled**

Age: 0 MGBase Sub-studies

Sex: Male Eligible: - Enrolled: -

Record Status: **Incomplete**

> [Manage Sub-studies](#)

> [Export Patient Report](#)

> [View Patient Graph](#)

> [Customise Graph](#)

Figure 30 - Patient Card functions in iMed Web

7.5. Patient Quick Links

The Patient Quick Links section provides quick access to commonly used actions, such as launching the Wizard and adding Visits, Exacerbations, Treatments, and Medical Tests and Conditions.

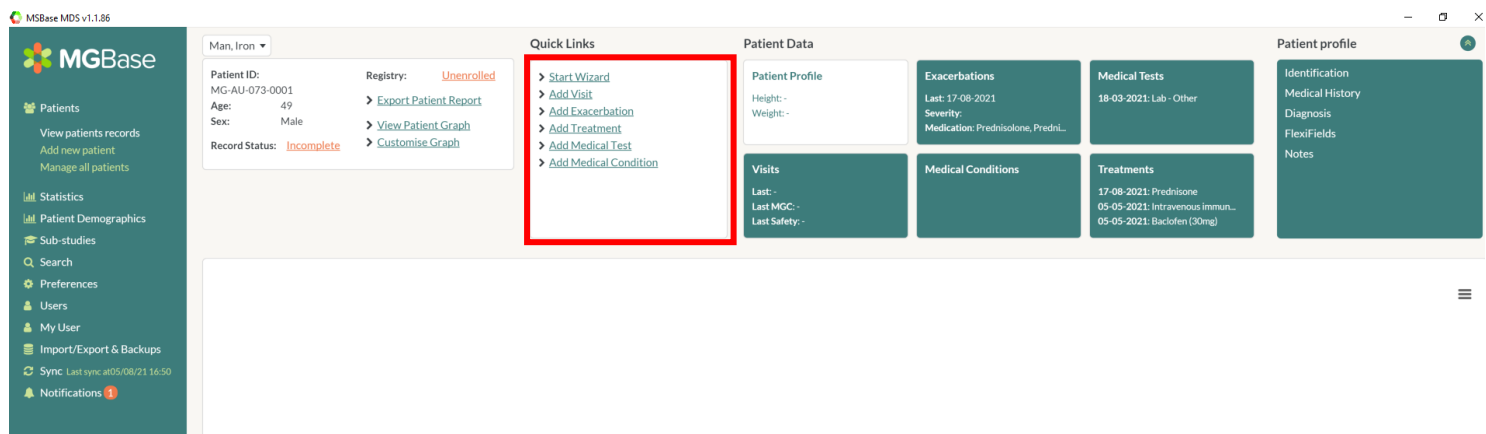


Figure 31 – iMed Web Quick Links

7.6. Patient Report

The Patient Report provides a high-level summary of the patient and may be used where a local policy requires patient data to be uploaded to an electronic medical record (EMR). The report can be exported in either Rich Text Format (RTF) or PDF.

To export a patient report, ensure the required patient is selected. Select Export Patient Report. In the export window, either enter a file path or select the Path icon  to browse to a location using Windows Explorer. Choose the export format (PDF or RTF) and select Run. iMed Web will notify you when the export is complete and the file is ready to view.

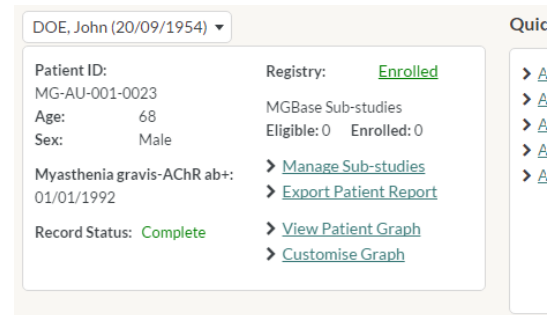


Figure 32 - Export a patient report

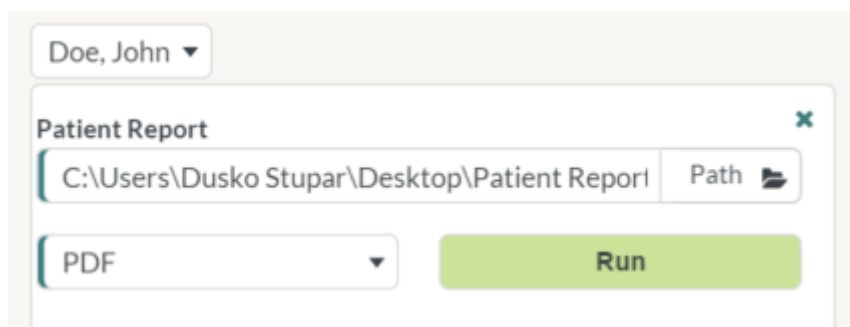


Figure 33 - Saving a patient report

7.7. Enrolling into Registry

When a patient is first created in iMed Web, they are not yet enrolled in the Registry. The Patient Card displays **Unenrolled** in orange text to indicate this status. Selecting this text prompts the user to confirm their decision to enrol the patient.

Unenrolling a patient is performed in the same manner.

Once a patient is enrolled, iMed Web displays **Enrolled** in bold green text, and MSBase sub-studies become available for enrolment.

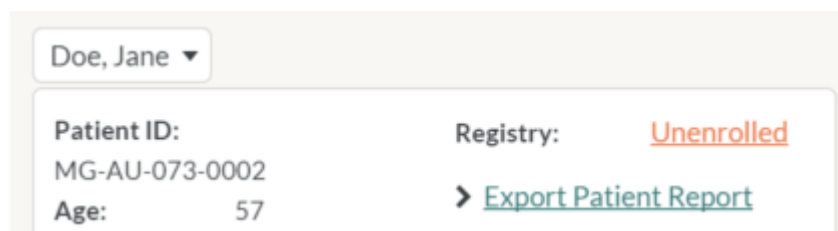


Figure 34 - Enroll a patient into the Registry

Doe, Jane ▾

Patient ID:
MG-AU-073-0002
Age: 57
Sex: Female
Myasthenia gravis-AChR ab+:
17/06/2015
Record Status: Complete

Registry: **Enrolled**
MGBase Sub-studies
Eligible: - Enrolled: -
[Manage Sub-studies](#)
[Export Patient Report](#)
[View Patient Graph](#)
[Customise Graph](#)

Figure 35 - An enrolled patient

7.8. Enrolling into Sub-study

Sub-studies allow for collaboration and data sharing between centres. Assuming your centre has already joined a sub-study, some further action still may be required to contribute your data if the study requires Manual Enrolment. For most sub-studies, patient enrolment is Automatic, meaning that if the patient meets the selection criteria, then the patient will

automatically have his/her data contribute to the study. Manual enrolment however is where the selection criteria is more subjective/difficult to capture, or special ethics/permissions must be sought. In a Manual sub-study, the user must manually enrol the patient into the sub-study.

When the user selects *Manage sub-studies* then the user is presented with a list of sub-studies that the patient is either enrolled in or eligible for. As clarified above, the patient may be enrolled into a sub-study if the enrolment method is automatic. Where the sub-study is Manual, then the user must select “Yes” in the enrolled column.

Once the patient is enrolled, and after synchronisation with the Registry has taken place, then any additional sub-study flexifields (if any) will be visible to the user.

7.9. Patient Completeness

The patient completeness is an extension of the MGBase Minimum dataset. It is designed to ensure the completeness of the data is thorough enough to make sound statistical inferences. The below components (highlighted in red) of the patient should be considered for patient completeness:

Section	Field	Frequency	Definition
Patient profile	Patient ID	Entry visit	Patient globally unique ID
	Last name	Entry visit	
	First name	Entry visit	
	Gender	Entry visit	
	Birth date	Entry visit	
MG Diagnosis	Disease category	Entry visit	Disease names
	Date of onset	Entry visit	Date
Visit	MRS	Annual #	Value
	MGC	Annual #	Total

Record Status: **Incomplete**

Figure 37 - An incomplete patient

The Patient Completeness report will look like the below image and will inform you if there are incomplete elements.

Patient completeness

Area	Warning
Diagnosis	Patient should be assigned a Date of MG Onset
Diagnosis	Patient should be assigned a disease category
Visit	Patient should have a Visit Date within the last 12 months

Close

Figure 38 - Patient completeness report

8. MGFA classification at confirmed diagnosis

8.1. CSR

No symptoms, no signs (except eye closure), no MG treatment 1 year

8.2. PR

No symptoms, no signs (except eye closure), no symptomatic MG therapy

8.3. MM

No symptoms nor limitations, minor weakness found on exam

8.4. MM-0

No symptoms, exam=MM, no MG treatment 1 year

8.5. MM-1

No symptoms, exam=MM, some immunosuppression, no symptomatic therapy >1 year

8.6. MM-2

No symptoms, exam=MM, only MG treatment <120mg pyridostigmine/day

8.7. MM-3

No symptoms, exam=MM, symptomatic and immunosuppression therapies in past year

8.8. I

Ocular

8.9. IIa

Mild generalised, predominantly limb/axial muscles

8.10. IIb

Mild generalised, predominantly oropharyngeal/respiratory muscles

8.11. IIIa

Moderate generalised, predominantly limb/axial muscles

8.12. IIIb

Moderate generalised, predominantly oropharyngeal/respiratory muscles

8.13. IVa

Severe generalised, predominantly limb/axial muscles

8.14. IVb

Severe generalised, predominantly oropharyngeal/respiratory muscles

8.15. V

Intubation

9. Patient Overview Graph (POG)

9.1. Overview

The Patient Overview Graph (POG) gives a visual representation of the patient's medical history. By default:

- Visits are displayed as vertical lines
- Treatments are displayed as blocks of time. Where a treatment is ongoing, the treatment will have an arrow-head up to the current date. MS-Specific, Symptomatic and Non-Pharmacological values are all displayed.
- Exacerbations are displayed as a block of time where an Exacerbation duration is supplied, or as a square icon where no exacerbation length is given.
- All medical conditions (Malignancy, NMSC, Herpes Zoster, Infection (severe), Other Adverse and flexifields) are displayed as a block of time, spanning from the begin date to the outcome date (where outcome might be remission or death).
- Pregnancy is displayed as a block of time, with the duration of the pregnancy defined by the beginning of the pregnancy and ending with either the birth or termination/miscarriage date.
- Electrodiagnostic Tests are displayed as a small teal square (■)
- Imaging tests are displayed as a small blue square (■)
- <insert Bedtime tests example>
- Laboratory tests are displayed as a square icon. In iMed Web, there are five categories of laboratory tests: Myasthenia antibodies, Haematology (H), Blood Chemistry (B), Thyroid Functions (T), Microbial Tests and Auto-antibody (A) Tests. iMed Web will recognise which categories of tests have been completed in each of the Laboratory Tests and display that information to the user.

In the bottom section of the POG there is a section where any time-series numeric value can be displayed. For MG the MGC Score will be displayed and is auto scaled to a value between 0-50 on the graph.

This section below will explain how to customise this graph should you need to.

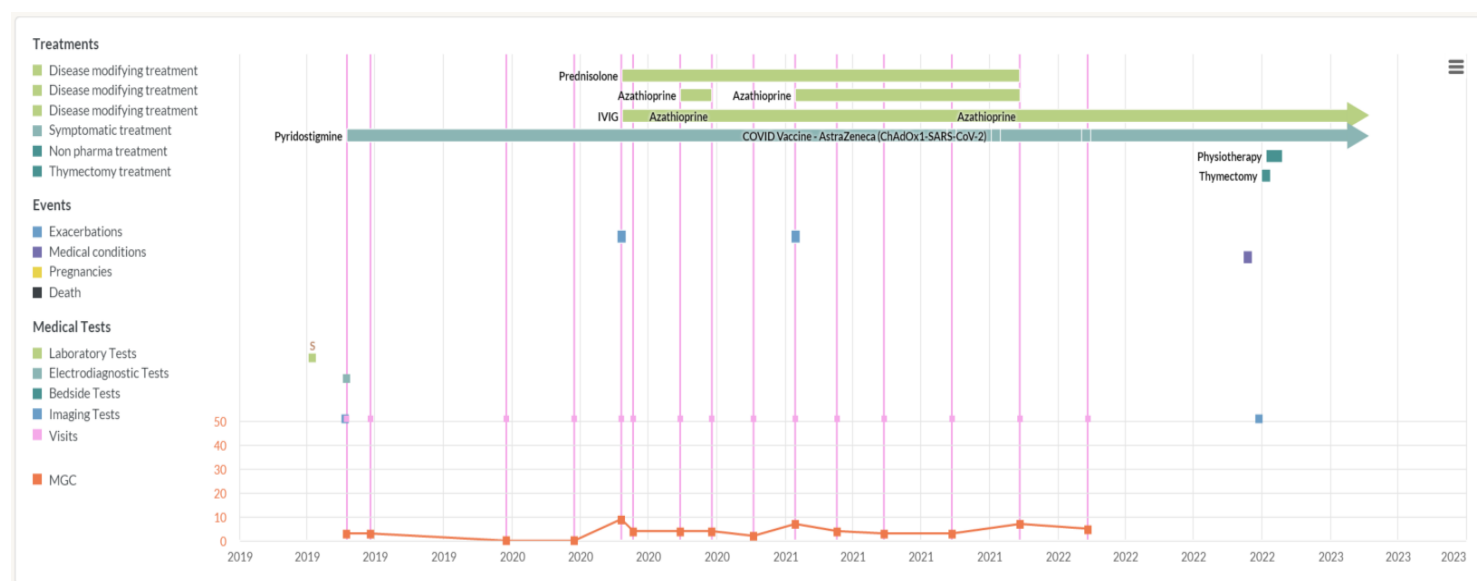


Figure 39 - The patient overview graph



Good to know!

The POG is interactive and will respond to user actions. When hovering over any of these elements, the graph will give a small description of the element and the date. Visits, Events and Paraclinical tests will take the user to the data entry form when selected. To focus on a specific time range, click on the graph and zoom (click and drag) into the desired region.

If you are finding the POG a little cluttered, by clicking on the elements in the left-margin/key, the user can turn on/off the corresponding indicators.

9.2. Export and Print

The POG can be exported to a variety of image formats (PNG, JPG, SVG and PDF), or printed. The POG will print in its current state. This means the graph will print the current zoomed range, any indicators that have been turned on/off and the time series shown at the bottom of the graph.

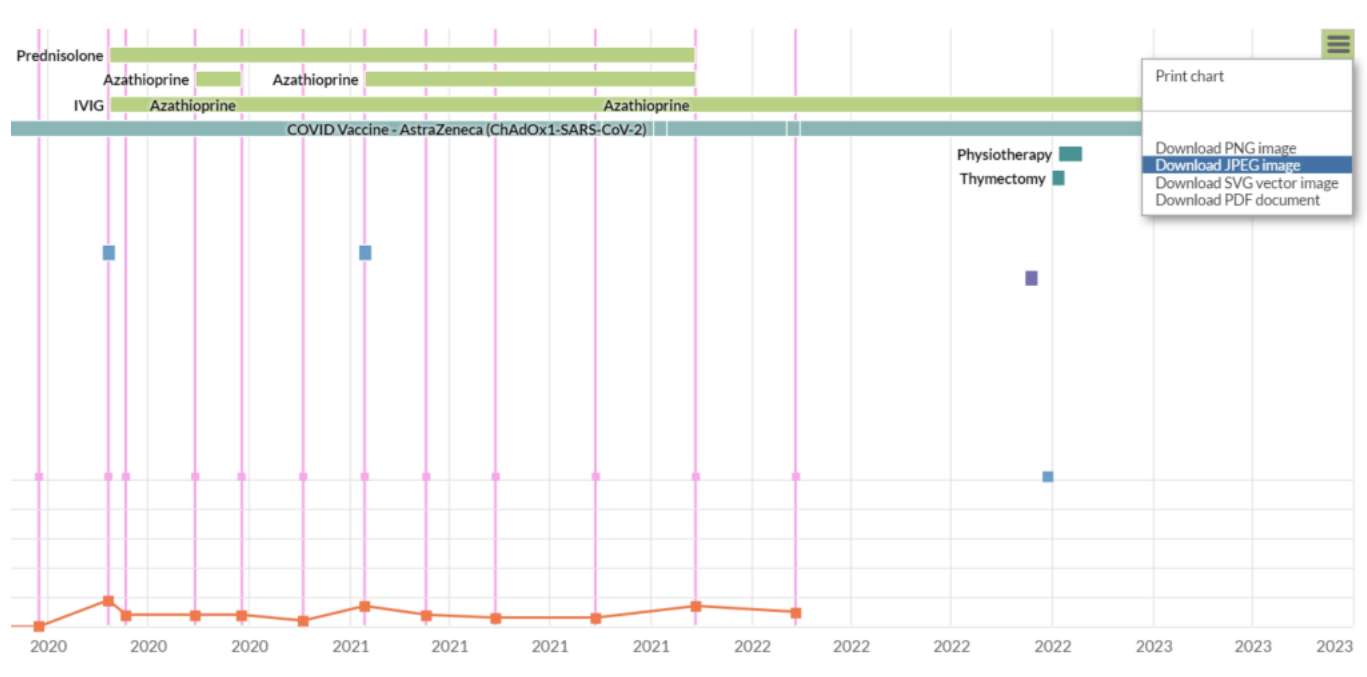


Figure 40 - Printing and exporting the graph

9.3. Graph field customisation

Any time-series numeric value can be displayed on the bottom of the POG. Do this by selecting *Customise Graph* in the *Patient Card* selector. This will open the POG customisation window.

In this window, by default, you should notice that the MGC – Selected Score will be plotted on the Y Axis Left and the series is not populated for Y Axis Right. You can select a numeric time-series value (from Exacerbation, Laboratory Test, Pregnancy, Treatment and Visit) for either Y Left/Right axis.



Good to know!

Since the new corticosteroid / variable dosing schedule functionality has been added, the POG can be customised to show a variable dosing schedule in graph format, for a particular treatment type. Do this by customising the “Y Axis – Right” section, select “Treatment” from the dropdown, then select “Dose Schedule” from the next drop-down, and select the relevant corticosteroid or IVIG / PLEX treatment. This can then be “Viewed” by clicking the “View” button and saved if required.

Customise Patient Overview Settings

Select saved graph

✕

☐ Is my default?
 Delete

Customise Y Axis - Left

☐ Display as percentage change

✕

✕

✕

Customise Y Axis - Right

☐ Display as percentage change

✕

✕

Revert to Default
Save As
View
Cancel

Section

- Exacerbation
- Laboratory Test
- Paraclinical tests
- Pregnancy
- Visit

Figure 41 - Customise Graph Options

9.4. Percentage Change

iMed Web can display the percentage change of a time-series values rather than the absolute values. For example, below we show the MGC value versus the MGC % change, where the percentage change of MGC (Δe) for any given point in time n is $\Delta e_n = \frac{e_n - e_{n-1}}{e_{n-1}}$.

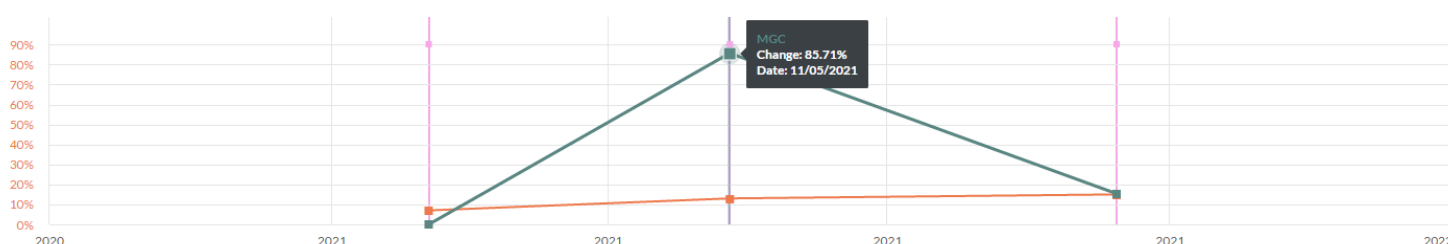


Figure 42 - MGC vs MGC % Change

The other advantage that percentage change gives you is the ability to display multiple values on the same index, despite being measured in ranges of differing magnitudes (for example display values in range 0.001 to 0.005 alongside values in the range 0.1 to 0.5) or different units (for example display seconds, ambulation index and lymphocyte values measured in $10^9/L$). We demonstrate this in the below example where we display the *Time to walk 8m* in seconds, *Ambulation Index* and *Lymphocyte count* on a single axis.

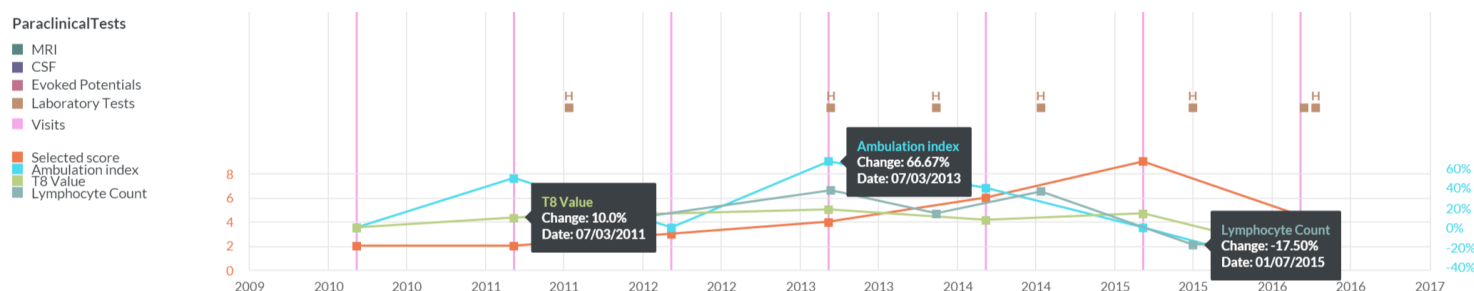


Figure 43 - Custom graph of Time to Walk 8 seconds, Ambulation Index and Lymphocyte Count

You can display percentage change by checking the “Display as percentage change” option. This will enable all values on that axis to be displayed as a percentage change. By selecting the Add Series option, additional time series can be displayed. Up to ten may be displayed on each axis.

Customise Patient Overview Settings

Select saved graph

MGC vs RBC vs WBC ☐ Is my default?

Customise Y Axis - Left ☐ Display as percentage change

Visit MGC Total Score

Customise Y Axis - Right ☒ Display as percentage change

Laboratory Test Haematology White cell count

Laboratory Test Haematology Red cell count -

Figure 44 - Adding percentage change fields

9.5. Saving and sharing graphs

Graphs can be shared with other users in your centre. By selecting “Save As” and entering a title and description other users in your centre will be able to see and implement your graphs.

Saved graphs are available for all users and can be viewed and selected by using the dropdown list. There are no private graphs in iMed Web.

Customise Patient Overview Settings

Select saved graph

Select an option ☐ Is my default?

Red Cell Count vs White Cell Count 10-01-2023
Red Cell Count vs White Cell Count
Created by: Dusko Stupar

MGC vs White Cell Count 10-01-2023
MGC vs White Cell Count
Created by: Dusko Stupar

MGC vs Red Cell Count 10-01-2023

Figure 45 - Selecting a saved graph

Any user in your centre can set a default graph that will display when they login. Set the default by selecting a graph from the dropdown list, select the *Is my default* checkbox. Now, anytime the user logs in, the initial graph displayed will be selected graph.

gt
gt
gt
atn
tm
atn

ns

Customise Patient Overview Settings

Select saved graph

MGC and Exacerbation Duration ☐ ☒ Is my default?

Customise Y Axis - Left ☐ Display as percentage change

Visit MGC Total Score

Customise Y Axis - Right ☒ Display as percentage change

Exacerbation Basic Exacerbation Duration

Tests

Figure 46 - Setting a default POG

If there are too many graphs in the dropdown menu then you can delete them by using the Delete option. Should a saved graph need to be updated, the graph can be selected, modified and then saved.

10. User Forms

10.1. Overview

iMed Web allows you to capture demographic (Patient Profile), Treatment, Exacerbation, Visit, Medical Test and Medical condition information about the patient.

iMed Web understands that many medical professionals do not have time for detailed data entry. That is why, when creating iMed Web, the MGBase foundation has intentionally kept mandatory fields to the absolute minimum. Refer to the documentation below for which fields are mandatory. Alternatively, iMed Web will inform you when the form does not have enough information to save.

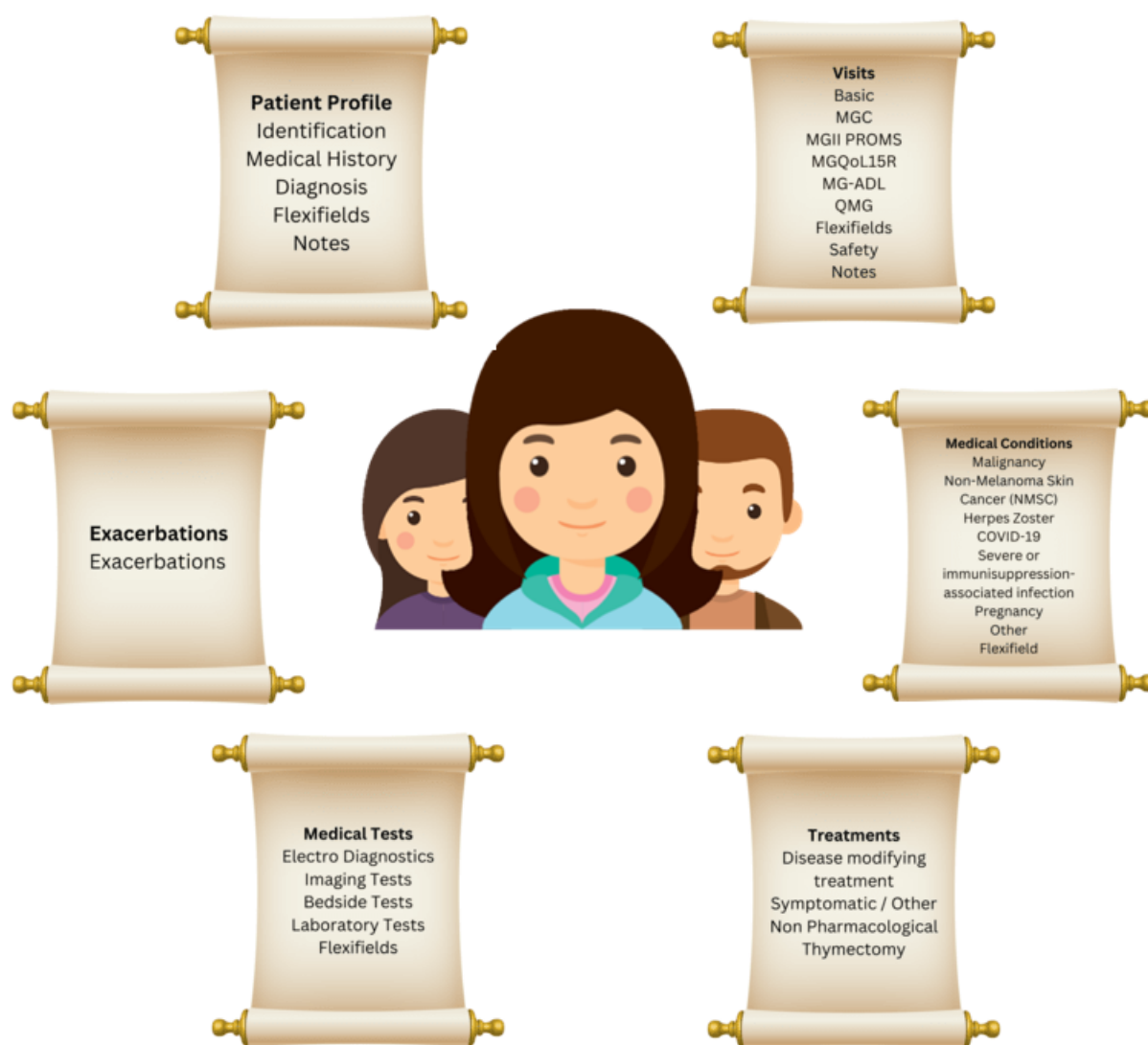


Figure 4 - Forms used by iMed Web to capture patient information

10.1. Patient Profile

The Patient Profile section captures basic information about the patient. Unlike the other forms in iMed Web, the Patient Profile forms are not time-series, meaning that a patient will only have one of the below forms. This section includes:

- The **Identification** form captures basic demographic details, for example the Age and Sex and demographic details of the patient.
- **Medical History** captures information about the patient's medical history and family medical history.
- **Diagnosis** captures MG specific diagnosis information about the patient and is the key component in determining the MG Course of the patient.
- **Flexifields** capture the additional centre specific fields if added by the centre. If the patient is enrolled in a sub-study that collects data, then the Sub-study flexifields will also be displayed.
- **Notes** section allows the user to capture notes about the patient.

10.1.1.Exacerbations

Exacerbations captures information about the patient's exacerbations in a time-series format. One patient can have multiple exacerbation events captured.

10.1.2. Treatments

The Treatments section captures basic information about the treatments assigned to the patient as time-series data. A patient with MS may have many different treatments over time. There are three types of treatment forms:

- **MG Specific Treatment** captures information about the patients ongoing and complete MG Specific treatments/DMT's (Disease Modifying Treatments). Some treatments may have an ongoing schedule, for example 30mg once per week or a **single dose** injection once every 6 months. For ongoing treatments, then the treatment should have a start and end date that spans the duration of the treatment. For a treatment that is a single dose, then the start and end date should be the same.
- **Symptomatic Treatment** captures information about ongoing and complete symptomatic treatments. An example may include Prednisone given to a patient to treat a relapse.
- **Non-Pharmacological** captures information about non-pharmacological treatments assigned to the patient. These may include, for example, physiotherapy or speech therapy.
- **Thymectomy** captures information about a thymectomy procedure including the types of procedure, data around preoperative treatment, hospital length of stay, postoperative complications and also comprises a section on pathology and thymus size.

10.1.3.Visits

The Visit section captures information about the patient when they visit the clinic. A patient may have many visits and each visit is separated into the below tabs:

- The **Basic** tab captures the commonly entered information about the patient during a visit. For example, the reason for their visit, height/weight and the results of clinical tests (8m-walk test, 9-hole-peg-test, blood-pressure, pulse).
- The **MGC** tab is the calculator used to select relevant values used to help determine the MGC score total.
- The **MGII PROMS** tab contains 4 main sections with questions relevant to the MGII Patient Reported Outcomes Measures
- The **MGQoL15R** tab contains a calculator with 15 questions specific to this specific MG Quality of Life questionnaire. The total is calculated based on selections.
- The **MG-ADL** tab contains questions relevant to MG Activities of Daily Living with relevant scores and an auto-calculated score total.
- The **QMG** tab contains the Quantitative Myasthenia Gravis questionnaire with 13 questions and a total score auto-calculated depending on selections.
- The **Flexifields** tab is where either centre specific flexifields, or sub-study specific flexifields, are captured.
- **Safety** allows you to capture information relating to post-authorisation safety study (PASS).
- The **Notes** tab allows you to capture notes about the patient.

10.1.4.Medical Tests

The Medical tests section captures information about medical tests performed on the patient. There are 5 different medical test forms that can be used in iMed Web:

Electro Diagnostics captures information about test results for SFEMG (single-fibre electromyography), Repetitive stimulation and NCS (Nerve conduction study)

Imaging Tests capture information primarily around imaging and type of Chest imaging modality (CXR, CT, MRI) and Chest finding (outcome)

Bedside Tests capture information around Edrophonium and Ice Test results

- **Laboratory Tests** captures information about Myasthenia Antibodies, Haematology, Blood Chemistry, Thyroid Tests, SMicrobial Tests, Auto-antibody tests and Others. Each tab contains a set of lab results, and each result can have a value, unit and comments. Where the values are out of range, or otherwise not normal, the *Normal?* column may be filled out and additional comments captured explaining the reason for abnormality, or other notes that the practitioner may want to enter.

- Custom **Flexifield** medical tests may also be captured. For example, your centre may have its own type of standardised testing that should be captured for each patient. These tests can be configured in the Preferences section and then added each time the patient performs a test.

10.1.5. Medical Conditions

Medical Conditions capture a wide range of ailments a patient might be experiencing.

- **Malignancy** allows you to record occurrences and details of malignancy. The MedDRA classification should be used to identify the type of malignancy and supplementary information provided in the fields (for example Stage and Treatment modality). If the malignancy is related to the death of the patient, then the malignancy should be recorded as an *Immediate/Underlying* cause of death.
- **Non-Melanoma Skin Cancer (NMSC)** allows you to record occurrences and details of NMSC. If the NMSC is related to the death of the patient, then the NMSC should be recorded as an *Immediate/Underlying* cause of death. MedDRA classification should be used to identify the type of NMSC.
- **Herpes Zoster** allows you to record occurrences and details of Herpes Zoster.
- **COVID-19** allows you to capture data related to a patient contracting the SARS-CoV-2 Virus. Fields include a MedDRA classification which defaults to COVID-19, a Date of onset, Diagnosis confirmed (note, if “Yes” choices present a list to select from including “PCR”, “Serology / Rapid Antigen Test”, “Typical Chest Imaging Finding”. The following sections are also covered: Symptoms, Other Medical Conditions, Lab Tests, Severity Indicator, Hospital Related Incidents and Outcome.
- **Immuno-suppression or infection** allows you to capture medical conditions that are related to suppression of the immune system or other infection. You should use MedDRA to classify the condition and populate additional fields where required. If the infection is related to the death of the patient, then the infection should be recorded as an *Immediate/Underlying* cause of death.

- **The Pregnancy module** in iMed Web allows recording of occurrences and detailed information related to pregnancy for all female patients. The Pregnancy page is only visible for patients recorded as female and supports standardized capture of maternal, pregnancy, and infant outcomes. Pregnancy data entered via this module may also contribute to the MGBase Long-Term Observational Pregnancy and Infant Outcomes and Safety Study, where applicable.

The module enables collection of a structured set of pregnancy-related data, including maternal details, pregnancy characteristics, and outcome information. Data fields that may be collected include Last Menstrual Period (LMP), Estimated Delivery Date (EDD), Assisted Reproductive Technology (ART) method, maternal ethnicity, substance use during pregnancy, and maternal congenital abnormalities. Pregnancy outcome data include pregnancy end date, gestational age (system-calculated), infant weight (grams or pounds), infant sex, breastfeeding status, obstetric and maternal complications, delivery method, and pregnancy outcome. Where present, congenital abnormalities can be selected and recorded under a dedicated “Congenital Abnormality” field using EUROCAT classification.

- **The Infant Outcomes module** captures longitudinal health information for each infant following a recorded pregnancy outcome, becoming available once the pregnancy outcome is saved and consent for infant data collection is recorded. It includes the infant’s date of birth (auto-filled from the pregnancy outcome), survival status, weight at the current visit (with the option to add multiple weights from routine health checks), hospitalisation status, and the presence of any diagnosed diseases. Specific conditions—such as neurological disease, immune system deficiency, and other diseases—are recorded using MedDRA lowest level terms. Data should be updated at every relevant maternal visit, and in cases of multiple gestational births (e.g. twins), separate infant outcome records are completed for each infant.
- **Other Events** captures medical events that are not classified as Melanoma, Immuno-suppression related, NMSC or Herpes Zoster. A medical condition may be selected from the reference data, but MedDRA is the preferred classification format. If the condition is related to the death of the patient, then the condition should be recorded as an *Immediate/Underlying* cause of death. **If the condition is a result, or related to, a drug that the patient is taking, then link the drug with the medical event using the dropdown list (which will display all drugs that the patient has taken prior to the occurrence of the condition).**
- **Flexifield** captures custom medical events or paraclinical tests. For example, if your centre was investigating Migraines, then a form capturing each Migraine (with Migraine specific fields) should be captured for each Migraine event (this form might include Duration [number field], Time of headache [dropdown box including morning, afternoon, evening], See Aura? [checkbox] and Further Comments [free text area]). Furthermore, if your centre then wanted to extend the migraine research with a cognitive test (for example), then this custom test should be created as a Paraclinical test instance.

10.2. Overview

iMed Web provides an overview of patient statistics for your centre. The graphs display information about all patients in iMed Web, not just those that are enrolled in the Registry. To see an overview of patients enrolled in just the Registry, refer to the Patient Demographics section. The statistics section can also be used to filter your patients to a sub-set instead of using the search function.

Currently iMed Web provides the following graphs/distributions:

- Duration of MG.
- MGC at last visit: The Myasthenia Gravis Composite Score at last visit.
- Exacerbations in the last 12 months.
- Age at onset of MG.
- Age at diagnosis of MG: The age at which your Myasthenia Gravis was diagnosed.
- Age: The length of time a person has lived.
- Gender.



Figure 47 - The statistics section

10.1. Displaying statistics for a subset of patients

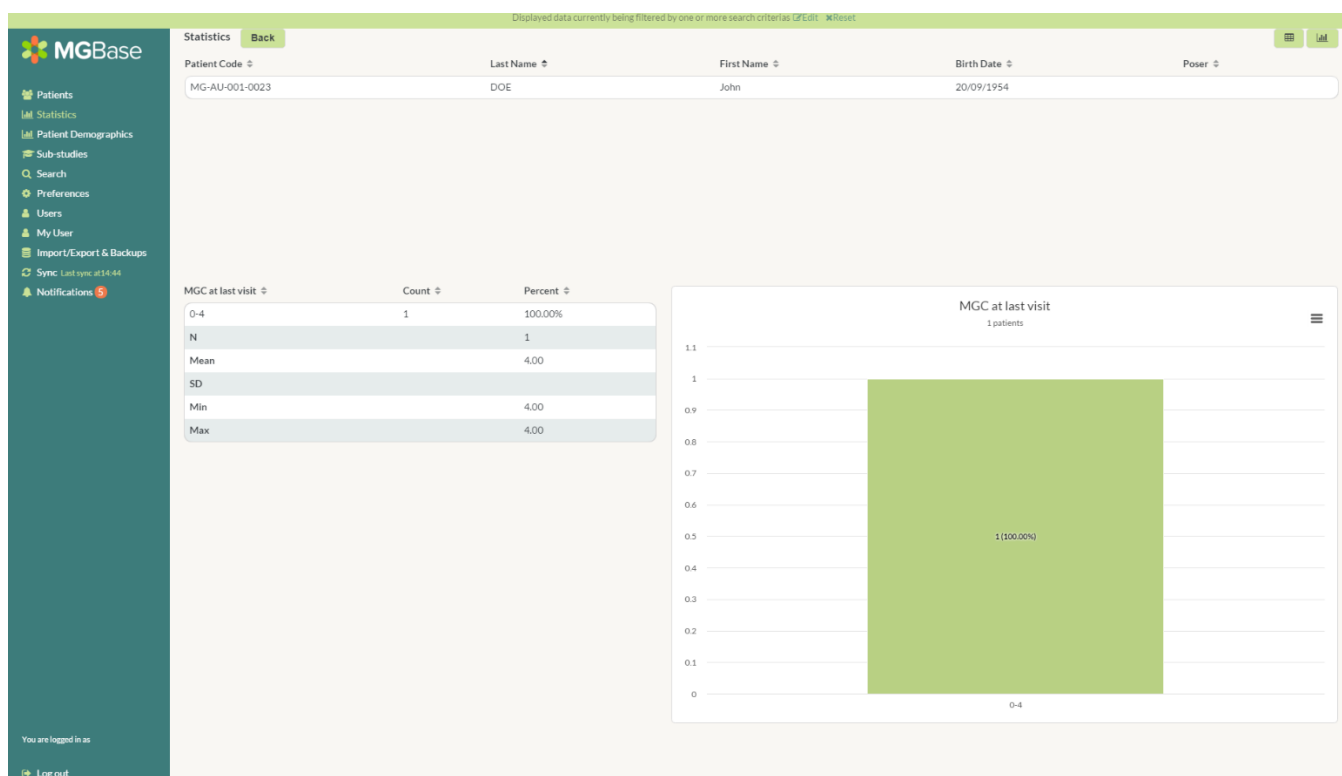
By default, iMed Web will display the statistics for all patients in your centre, but statistics may be applied to a subset of patients by using the Search functionality. When you search for patients, the results will be filtered to meet the search criteria. If you then view the Statistics section, then only the statistics for the patients that meet your search criteria will be displayed. In the below example we have searched for all patients below 20 years of Age and are displaying the statistics for those patients only.



Figure 48 - Filtered statistics for patients younger than 20 years of age

10.2. Cumulative Filtering

iMed Web allows you to use the Statistics section as a visual search/filter function. By clicking into each distribution and selecting the desired bar, the results will filter. The below example visually represents all the males who have had a Total MGC at last visit of less than 5.



The filters can be removed by selecting “Reset Filter”.

11. Sub-studies

11.1. Overview

What is a sub-study? A sub-study is a mechanism that allows centres to share data for research purposes. Creating a sub-study is a way that you can request data from other centres, while joining an existing sub-study will allow you to contribute your centre's data for research.

11.2. How does a sub-study work?

For example, consider you want to analyse the data for *"All females from Australia and New Zealand"*. Once you have entered the basic details about the sub-study, you then need to identify the Member Selection, Patient Selection and Flexifields. The Member Selection would be *countries that are equal to Australia or New Zealand* and the Patient Selection would be restricted to *"Gender = Female"*.

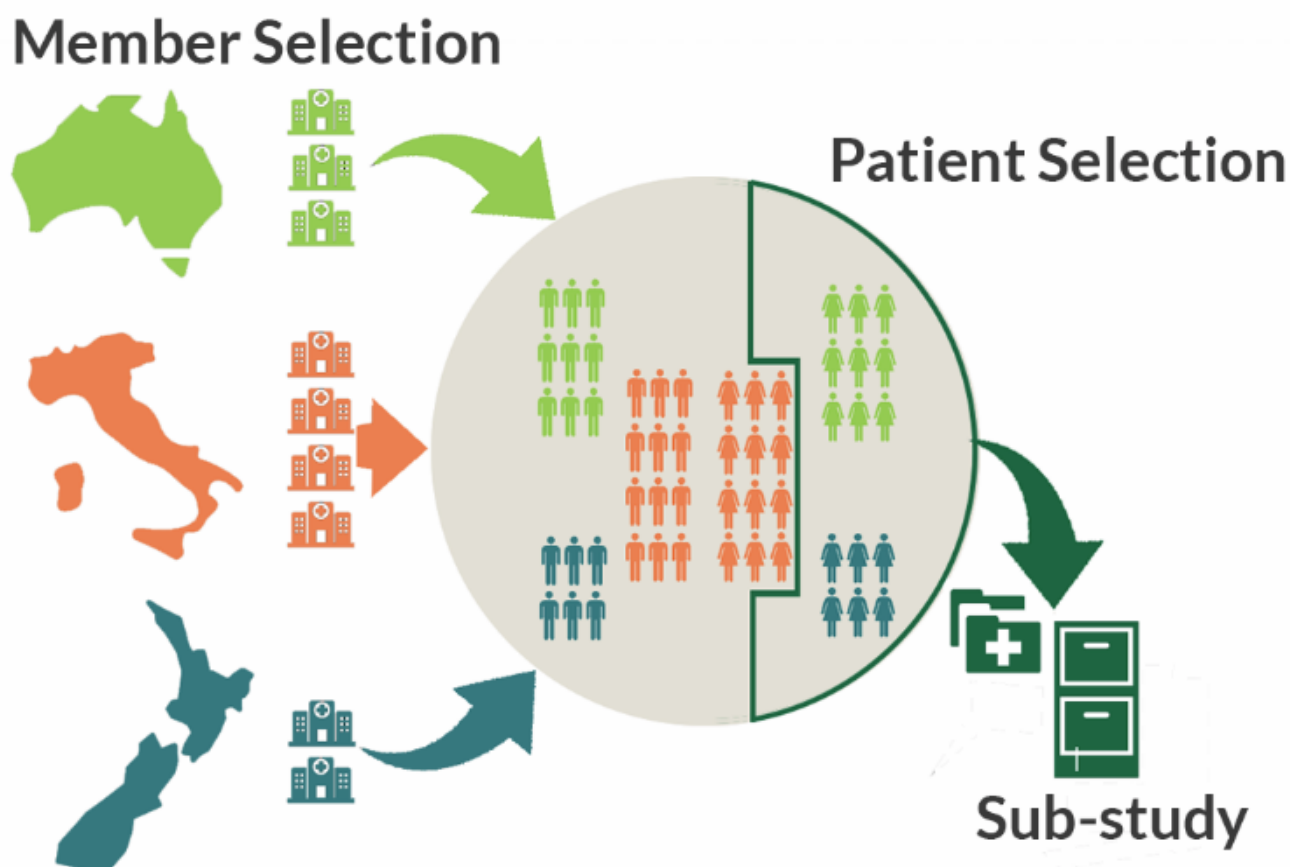


Figure 49: Visualisation of the selection process of All females from Australian and New Zealand centres. Note Italian females were not included as they did not meet the Member Selection criteria.

Once the sub-study is active, and as soon as a member joins your sub-study, then the data of all the patients meeting the selection criteria will be available to download for the creator of the sub-study only. This is called *Automatic enrolment* and is the default for most sub-studies. Some sub-studies may require *Manual enrolment*. These studies require members to manually enrol patients to the sub-study. Reasons for this method might include:

- Selection criteria that is complex or may require a medical/other judgement from the centre
- Sub-study that requires special ethics or patient approval

Sub-studies can be created if you have PI privileges. This section provides details on how to create a sub-study, manage that sub-study and view and join sub-studies. Studies can be created either in iMed Web or the Registry.

All sub-studies will require to be approved by the MGBase Operations team after submission. If you have any questions, please contact the team at info@msbase.org.

11.3. Viewing sub-studies

You can View sub-studies when logged into iMed Web, however only a PI will be able to join the centre to the study. Sub-studies that your centre is eligible to join will be presented first in the *Available Studies* section, while sub-studies that are not available for your centre (due to centre or country restrictions), are in the *Other Studies* section. You can view the details of the sub-study by selecting View or you can join the sub-study by selecting Join.

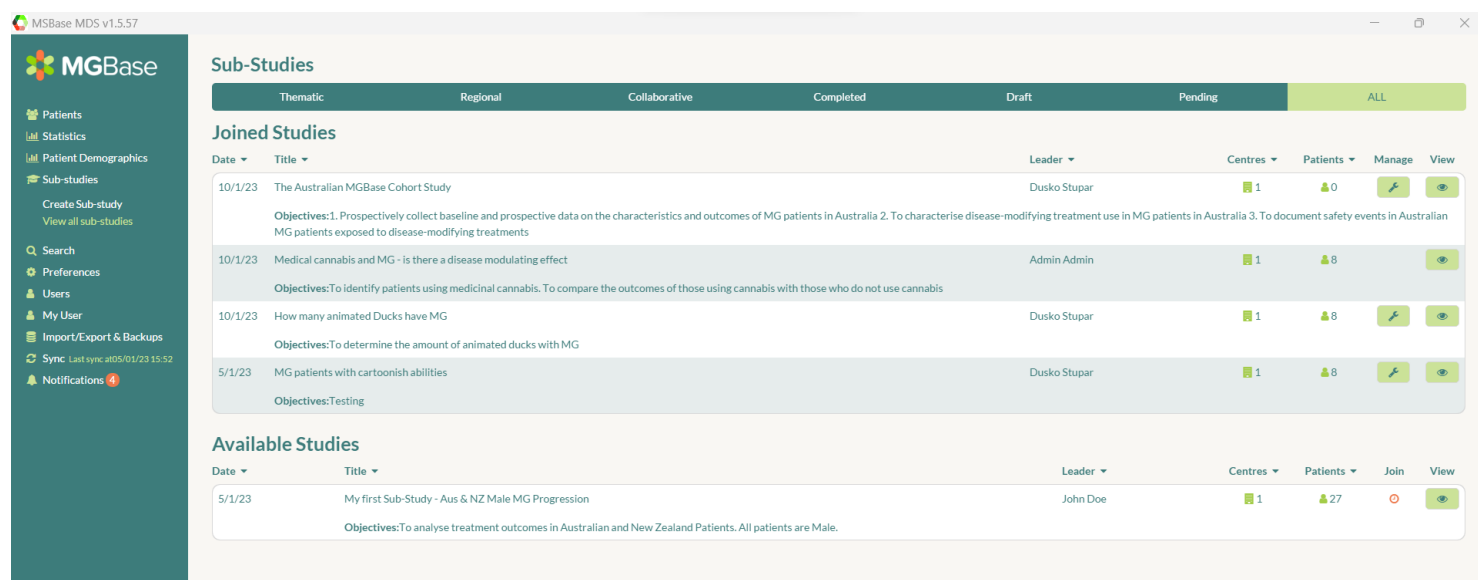


Figure 50 - Viewing sub-studies in iMed Web

All users will be able to see basic information about the sub-study when viewing the individual sub-study. This information includes sub-study descriptions and endpoint, Enrolment History and Enrolment Country distributions. You can also join the sub-study from this section by clicking Join Study.

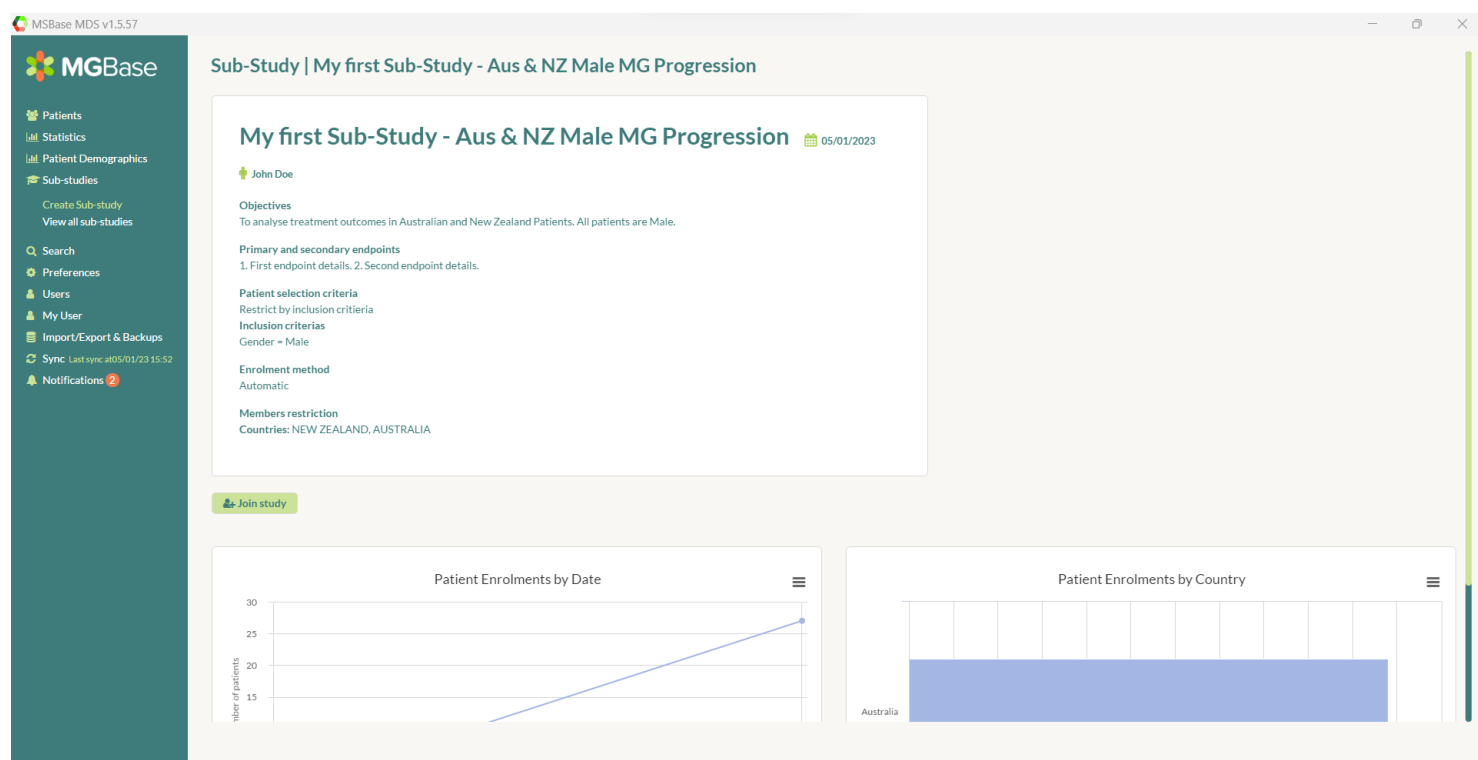


Figure 51 - Information about the Aus & NZ Male MG Progression sub-study

After joining a sub-study, the owner of the sub-study must accept your join request. Once the request has been approved then you will also be able to view other member information, news and documents and patient demographic data.

If you are the manager of a sub-study, then you will receive an email notification when another MGBase member requests to join.

11.4. Joining sub-studies, Enrolment and Manual enrolment

Some sub-studies are specified as Manual Enrolment and operate on an opt-in basis. This is different to the automatic enrolment as it requires the member to manually select the patients they want to enrol. This may be useful if the patient inclusion criteria are subjective or complex.

If you have joined a sub-study that has manual enrolment, there are two ways you can add patients. One way to add them is at the sub-study level. To do this, go to the sub-study and on the Overview tab select Enrol Patients.

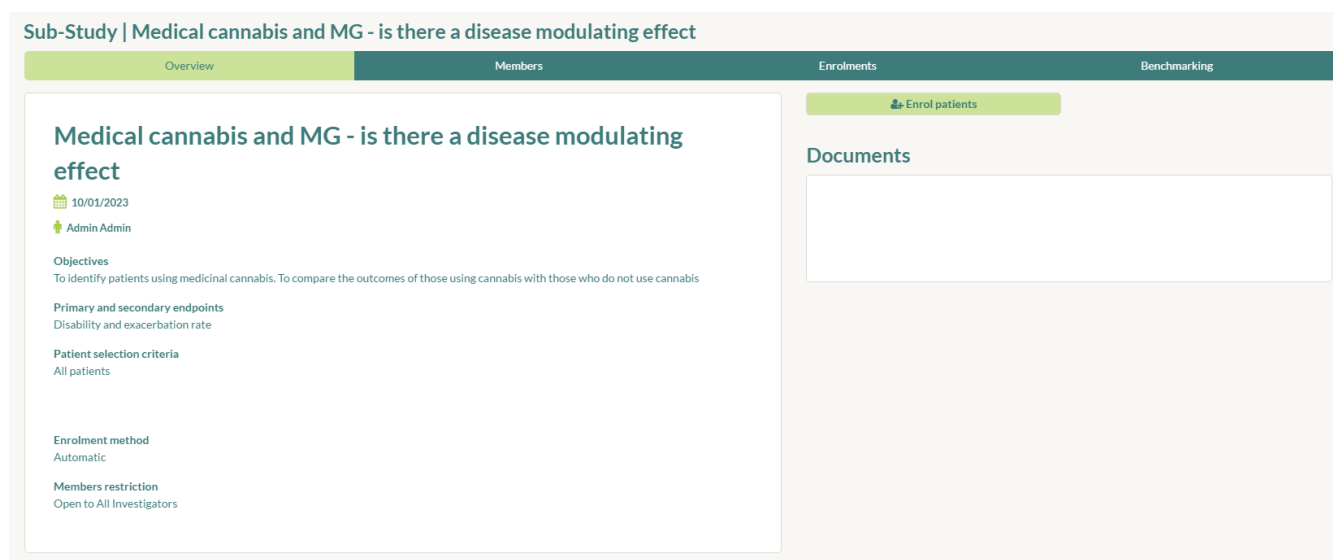


Figure 52 - Enrol a patient via the sub-study

A new window will allow you to add patients by selecting the Enrol and Unenroll button. In some cases, your patient will not be able to be enrolled to a manual sub-study. This is due to the patient criteria restricting access. For example, we can restrict a sub-study to females only and still require manual enrolment.

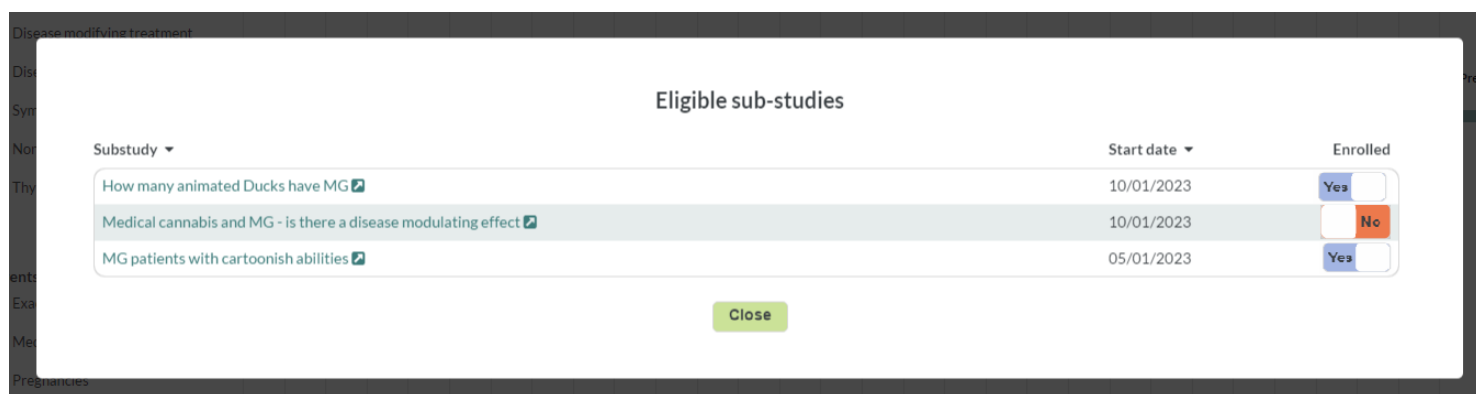


Figure 53 - Enrol a patient manually

An alternative way to enrol patients is in the Patient View, refer to earlier section 7.8 *Enrolling into a Sub-study* for how to complete this.

Good to know!

In what circumstances should I use either view? The sub-study specific view detailed in this section should be used when you first join a sub-study and want to enrol multiple patients in bulk to the single sub-study. The patient specific view explained in earlier sections should be used when a patient is new to the Registry and you want to enrol him/her to one or more sub-studies.

11.5. Managing sub-studies

To manage your sub-study, find your sub-study and click Manage. The Manage dashboard allows you to re-invite members (an automatic email will be sent to all eligible centres) and download all the data of the participating patients. New centres that wish to join your sub-study will need to be Accepted or Declined before their data becomes accessible.

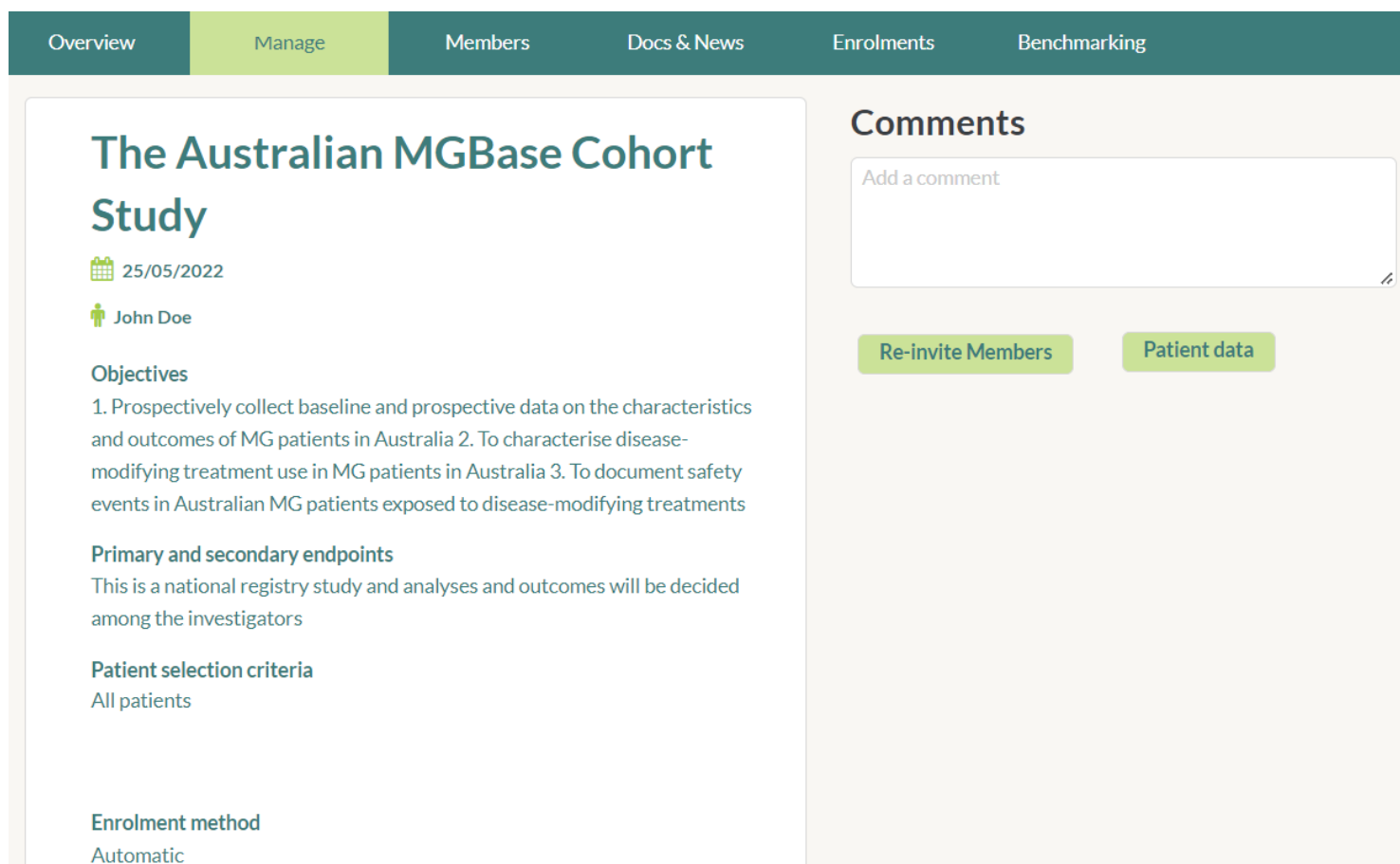


Figure 54 - Managing a sub-study

When a new centre is accepted, the patients will be automatically enrolled into your study (except where manual enrolment is set). As new patients from participating centres become eligible for your study, they will be automatically added to your sub-study. Once a patient is added to your study then they cannot be removed. For example, if your selection criterion is: “Has an **ongoing** treatment of Drug X” and a patient stops treatment, then that patient will stay in your sub-study.

11.1. Sub-study news and documents

As the leader of a sub-study, you can communicate with your members by posting Docs & News to keep members up to date. Selecting Add will open a text editor, allowing you to add sub-study news. You are also able to upload documents relevant to the sub-study. Select Files that you want to upload and select Start Upload.

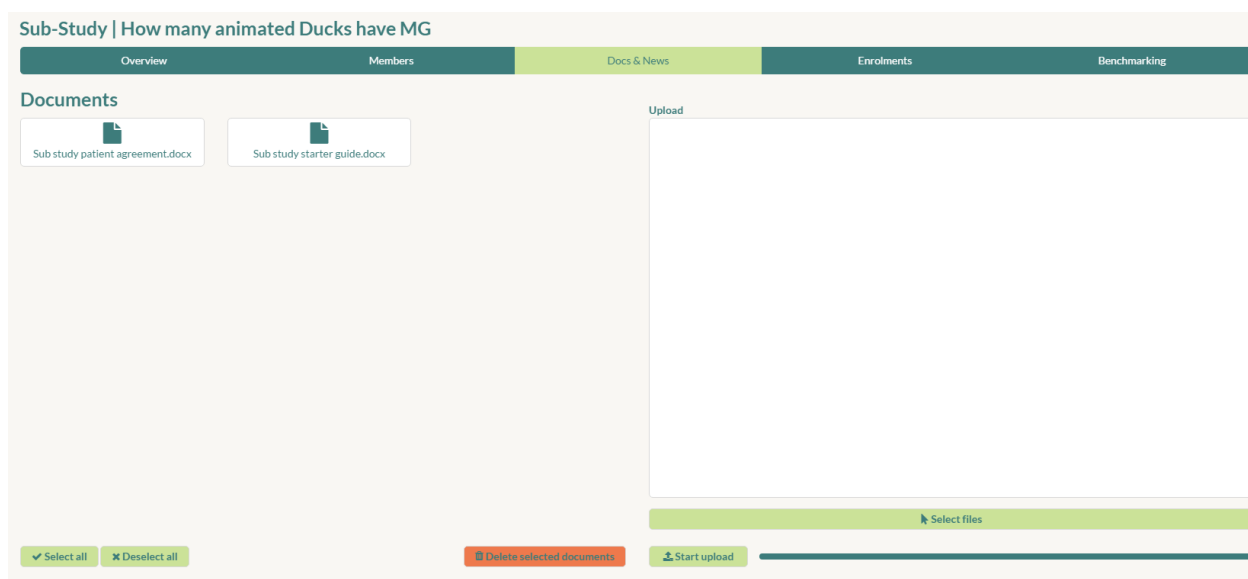


Figure 55 - Adding documents and news items

News and Documents will appear to all members of the sub-study. Members will also receive an email notification of the News item and Document addition.

11.2. Patient Enrolment graphs

Patient enrolment for the sub-study displays the enrolments by date and enrolments by country. By hovering over the markers in either graph, the tooltip will display exact numbers and date.

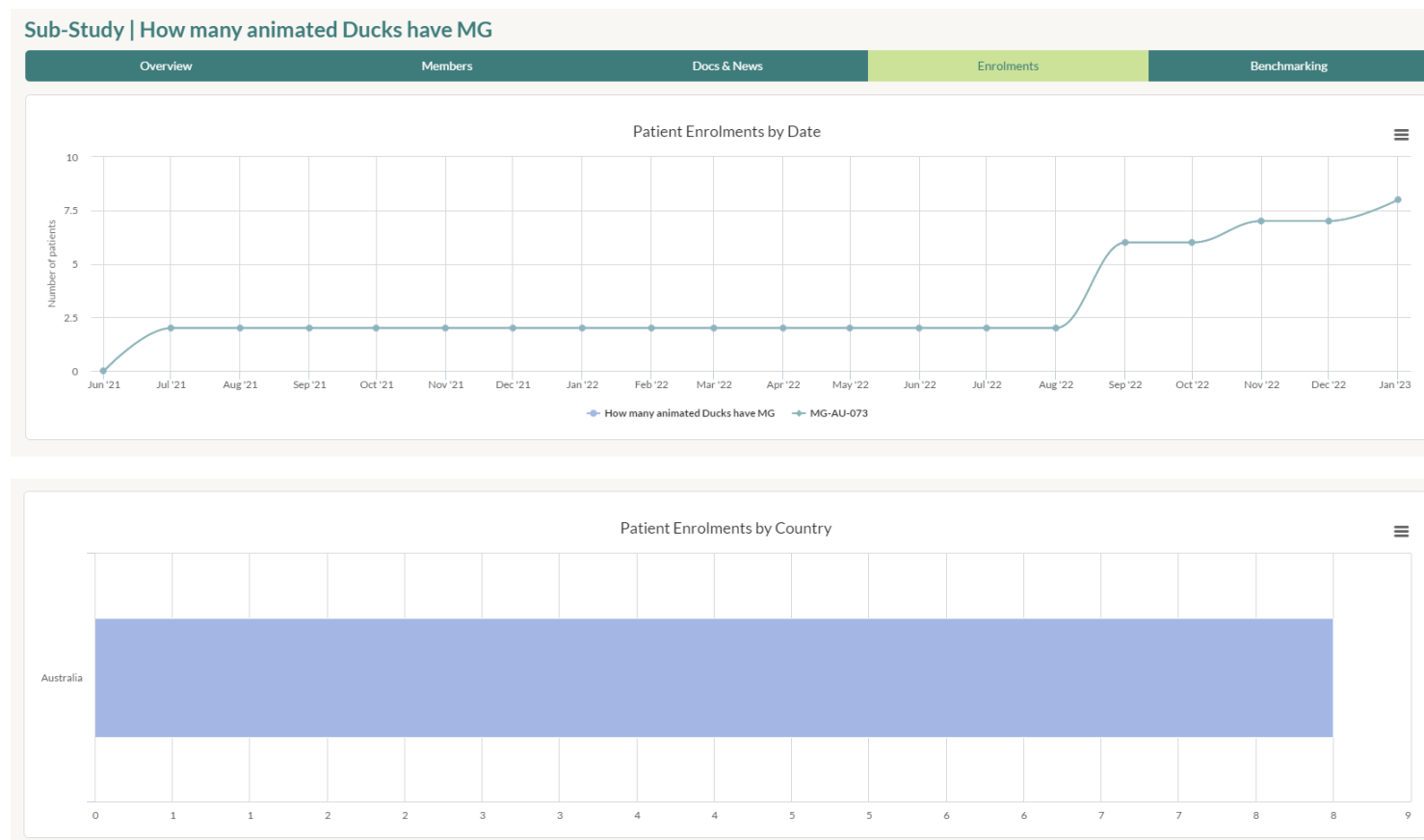


Figure 56 - Patient Enrolment

11.3. Displaying Members of a sub-study

Members of a sub-study can see other members, their contact details and their email address. To view the profile of a sub-study member, select the View option.

Sub-Study | How many animated Ducks have MG

Overview Members Docs & News Enrolments Benchmarking

Members

Last Name ▾	First Name ▾	Country ▾	Centre ▾	Centre Code ▾	Patients enrolled ▾	Join date ▾	View	Remove
Stupar	Dusko	AUSTRALIA	UAT MG Centre	MG-AU-073	8	10/12/2020		

[Back to all Sub-studies](#)

Figure 57 - Sub-study members section

11.4. Benchmarking

The MGBase Registry allows members of a sub-study to benchmark their centre data against the overall data in the sub-study cohort as well as the entire MGBase Registry. In the below example we can see that the sub-study has 5 females (100%), while the MGBase Registry consists of 36,376 (70.46%) females and the sub-study members centre (AU-033) has just 1 (16.67%) female.

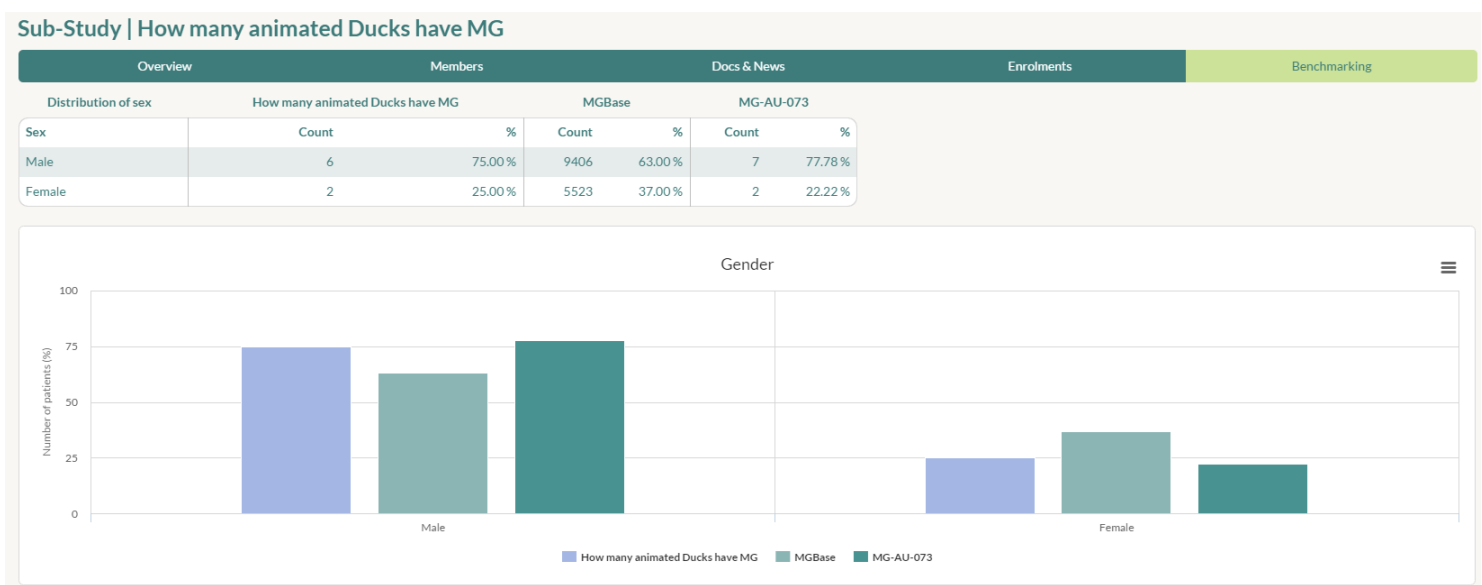


Figure 58 - Sub-study benchmarking

11.5. Creating sub-studies

11.5.1. Project Description

A sub-study can be created by a PI To create a sub-study, select Create Sub-study and fill in the required details. These details will be used by other members to decide whether they wish to contribute data to your research, therefore it is important to be descriptive. Your sub-study details will also be visible on the MGBase website, so please take this into consideration should your research topic contain any confidential or sensitive content. Finally, please ensure that the title and description is in English. Once you have finished entering details about your sub-study, click Next.

Create a Sub-Study

- Project description
- Member selection
- Patient selection
- FlexiFields
- Review

Study Title **1**

The Australian MGBase Cohort Study

Objectives **2**

1. Prospectively collect baseline and prospective data on the characteristics and outcomes of MG patients in Australia 2. To characterise disease-modifying treatment use in MG patients in Australia 3. To document safety events in Australian MG patients exposed to disease-modifying treatments

Primary and secondary endpoints **3**

This is a national registry study and analyses and outcomes will be decided among the investigators

Figure 59 - Create sub-study - Step 1 - Project Description

11.5.2. Member Selection

When selecting Members, there are three options.

- Open to all Investigators: This option will allow any member from any country or centre to join
- Restrict to Investigators from the following countries: This option will restrict member selection to country
- Restrict to Investigators from the following centres: This option will restrict member selection to individual centres

In our example we are restricting members by country by only allowing Australia and New Zealand members to join. Once we have selected our members, click Next. **Your centre must be in the country that you are restricting by or must be one of the centres if restricting by centre.**

Figure 60 - Create sub-study - Step 2 - Centre Restrictions

11.5.3. Patient Selection

After selecting our members, we must then restrict the patient selection. Patients can be restricted in 3 ways:

- **All patients:** “All patients” removes all restrictions.
- **Restrict by inclusion criteria:** All patients that meet a specific search criterion
- **Restrict by manual enrolment:** Used in combination with the above, if this option is checked, then the member must manually enrol each patient individually.

In the below example we have made the decision to restrict the patient inclusion by search criteria. We then enter the desired search criteria and click Next.

Figure 61 - Create sub-study - Step 3 - Patient Selection

Good to know!

The Patient Selection screen will display how many patients in your centre meet the search criteria. In the above example 231 patients meet the search criteria (i.e. are female). If you have 0 patients meeting your search criteria, it may be an indicator that your search has an error or is overly specific.

If you are unsure about which fields you need, or have complex search criteria, simply continue with the sub-study creation process and when finished send an email to the MGBase Operations team at info@MGBase.org. Additionally, for more complex searches, it may be preferable to be more inclusive and remove additional patients during data cleaning.

11.5.4. Flexifields

Do you have specific data you require about each patient for your research? For each sub-study it is possible to capture custom data fields. Patients that join that sub-study will have those fields sent to their iMed Web application for additional data entry.

If the patient is enrolled in a sub-study that has its own sub-study flexifields, then they will be displayed with different tabs.

There are 7 different types of fields that can be captured for a sub-study. Data types include:

- **Text:** Alphanumeric text restricted to 200 characters
- **Numeric:** Number only with a maximum of 3 decimal places
- **Date:** Date field for past and future dates
- **Text-Area:** Alphanumeric text for comments and longer text
- **Dropdown:** Allow the user to select 1 value from a list of many values
- **Checkbox:** For True (checked) and False (unchecked) values

- Section Break: For complex data entry forms use the section break to sort the fields into logical sections

Data can be captured at the Patient Identification level and at a Visit level. Patient Identification should be used for data that will be captured only once and won't change over time (for example patient permission acknowledgement, eye-colour or phone-number). Visit data is captured at each visit and utilises time-series/longitudinal fields (for example height, weight or current mood). Simply select the section you wish to add a field to, then click Add. When finished, click Next.

For our example, we are capturing Pulmonary Function – Total Lung Capacity (Numeric) and Pulmonary Function – Vital Capacity (Numeric)

1

Project description

2

Member selection

3

Patient selection

4

FlexiFields

5

Review

Flexifields

Add

1

Patient Identification

Visits

Sort	Name	Type	Unit	Minimum	Maximum	
	Pulmonary Function (Total Lung Capacity)	Numeric		0	100	
	Pulmonary Function (Vital Capacity)	Numeric		0	100	
	2	Select an option 3	4	5	6	7

Figure 62 - Create sub-study - Step 4 - Flexifields

Prior to submitting your sub-study, review the details and change as required. When ready to submit your study for approval, click Save. You can Cancel the sub-study at any point.

1

Project description

2

Member selection

3

Patient selection

4

FlexiFields

5

Review

The Australian MGBase Cohort Study

05/01/2023

Objectives

1. Prospectively collect baseline and prospective data on the characteristics and outcomes of MG patients in Australia 2. To characterise disease-modifying treatment use in MG patients in Australia 3. To document safety events in Australian MG patients exposed to disease-modifying treatments

Primary and secondary endpoints

This is a national registry study and analyses and outcomes will be decided among the investigators

Patient selection criteria

All patients

Enrolment method

Automatic

Members restriction

Countries: AUSTRALIA

Figure 63 - Create sub-study - Step 5 - Review and Submit

Your sub-study is now awaiting approval from the MGBase Operations team. You can enquire about progress at any time with the Operation Team at info@msbase.org . You will be notified by email if your sub-study is successful. All eligible members will also be sent an email advising them that a new sub-study has been created.

12. Search

12.1. Introduction to search

iMed Web contains a powerful search interface which allows you to perform multiple nested searches. Nearly all fields are searchable within iMed Web. Spend some time familiarising yourself with this feature to ensure your searches are correctly formed.

In the below example, we are looking for all patients that meet **all the below** criteria

- All males
- Has an exacerbation after 2015
- Has a Visit after 2015
- Has MedDRA SOC value that is equal to *Respiratory* OR *Neoplasm* OR *Immune System*
- Has an Electro Diagnostic with a SFEMG equal to *Normal* or *Equivocal*

Search- Complex Search in MDS

And **+Group**

Profile Identification Gender = Male

Exacerbations Exacerbation Onset date ≥ 01/01/2015

Visits Basic Date of visit ≥ 01/01/2015

Or **+Group** **-Group**

MedDRA All events System Organ Class (SOC) = Respiratory, thoracic and media...

MedDRA All events System Organ Class (SOC) = Neoplasms benign, malignant a...

MedDRA All events System Organ Class (SOC) = Immune system disorders

Or **+Group** **-Group**

Paraclinical tests Electrodiagnostic test SFEMG = Normal

Paraclinical tests Electrodiagnostic test SFEMG = Equivocal

Figure 64 - A complex search in iMed Web

Note in the example that a new group is being used with an **Or** operator for both the MedDRA and MRI component of our search. This is because a patient should meet at least one of the criteria, but the patient does not need to meet *all* criteria.

A little confused? Read on below for further instructions.

Good to know!

The iMed Web search functionality is powerful but is not able to meet all the complex requirements for searches. You may be required to extract the data from iMed Web and apply searches in Excel, SPSS or another statistical tool. When performing searches, apply search criteria iteratively to ensure the results appear correct.

12.2. New Search

12.2.1. Field Selection

To find the field you wish to search, in the first drop-down list select the section the field appears in, then select the form in the second drop-down and finally the field name in third drop-down. You can also enter the name of the field and filter to locate the field faster.

Medical events Pregnancy

Criteria

Abnormality

Abortion or miscarriage date

Beginning of pregnancy

Birth date

Breast feeding

Breastfeeding end date

Breastfeeding start date

Children born from pregnancy

Figure 65 - Search field selection

12.2.2. Operators

The Operators allow you to give more precision to your search and are context dependent. For example, for number and date fields, we can apply an equal to, less than, greater than and not equal operators. Those operators are not applicable for a text field, so for text fields only Starts With and Contains is available. A complete list of operators is below.

- Number and Date Fields
 - = Equal to
 - ≠ Not equal to
 - < Less than
 - > Greater than
 - ≤ Less than or equal to
 - ≥ Greater than or equal to
- Drop Down lists, Options and Checkbox
 - = Equal to
 - ≠ Not equal to
- Text & Text Area
 - Starts With
 - Contains

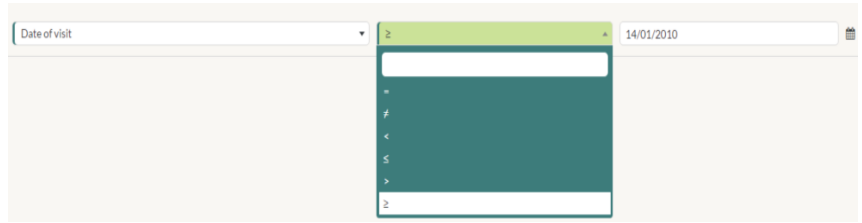


Figure 66 - Operators in iMed Web

12.2.3. Search - And/Or and Grouping

The And/Or operators join multiple criteria that are connected. This is more easily represented visually. In the below image we see that the *MedDRA Group (Green)* are joined by OR, meaning that for the group to be responsive, one or more of the three MedDRA criteria need to be met. Similar to *MRI Tests Groups (Purple)*, patients that meet one or more of the MRI requirements will be included. The *Parent Group (Red)* however is an AND operator, which means that for a patient to be returned in the search, all the 5 criteria must be met (Identification, Relapse, Basic, MedDRA Group, MRI Group) for a patient to be responsive to the search.

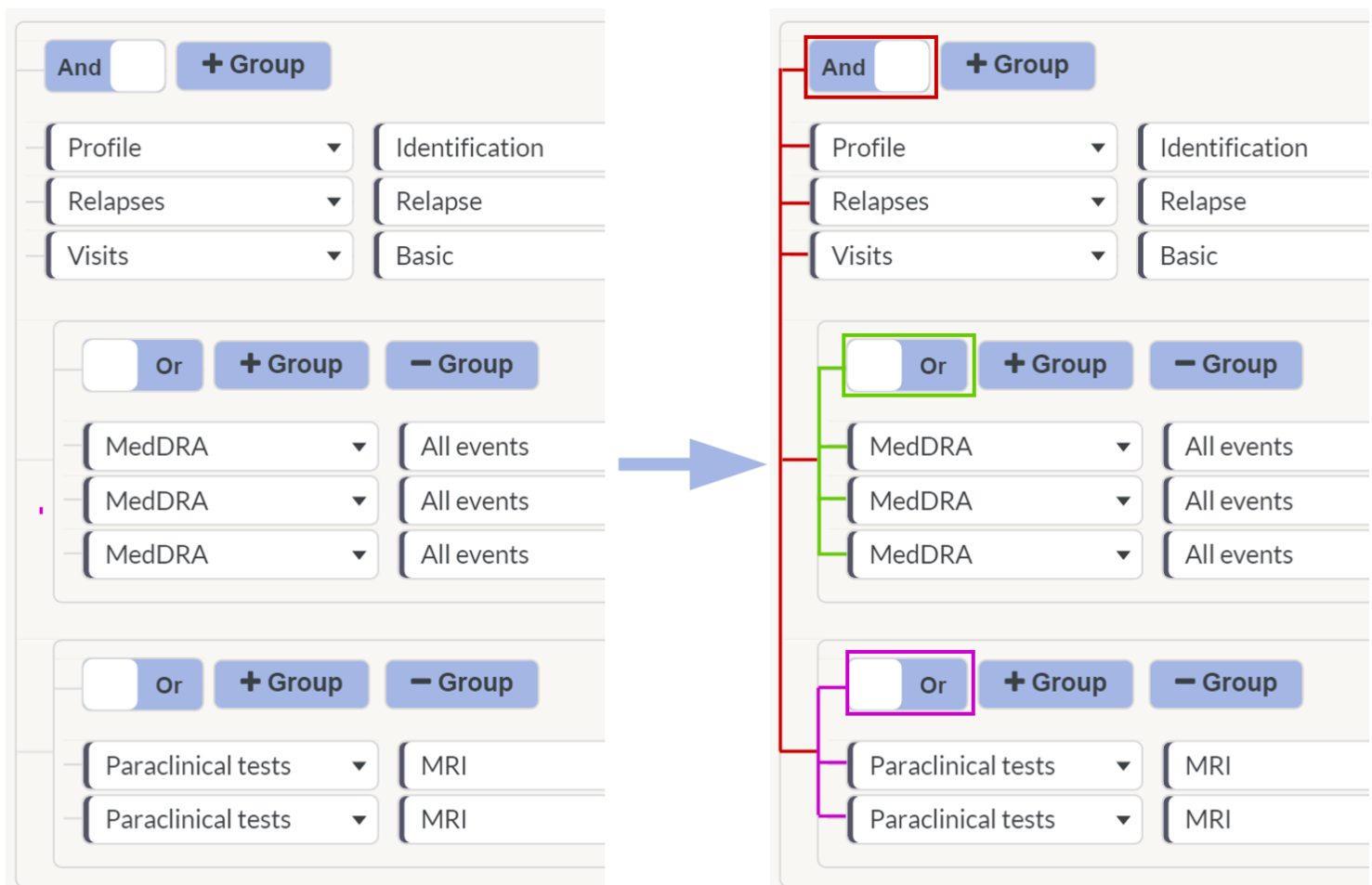


Figure 67 - And/Or operators and groups

12.3. Saved Search

Searches may be saved after they have been created. Simply select Save when constructing your search and enter a name for the search. Saved Searches are available for all other users in the centre to view and use. A saved search may also be edited as required.

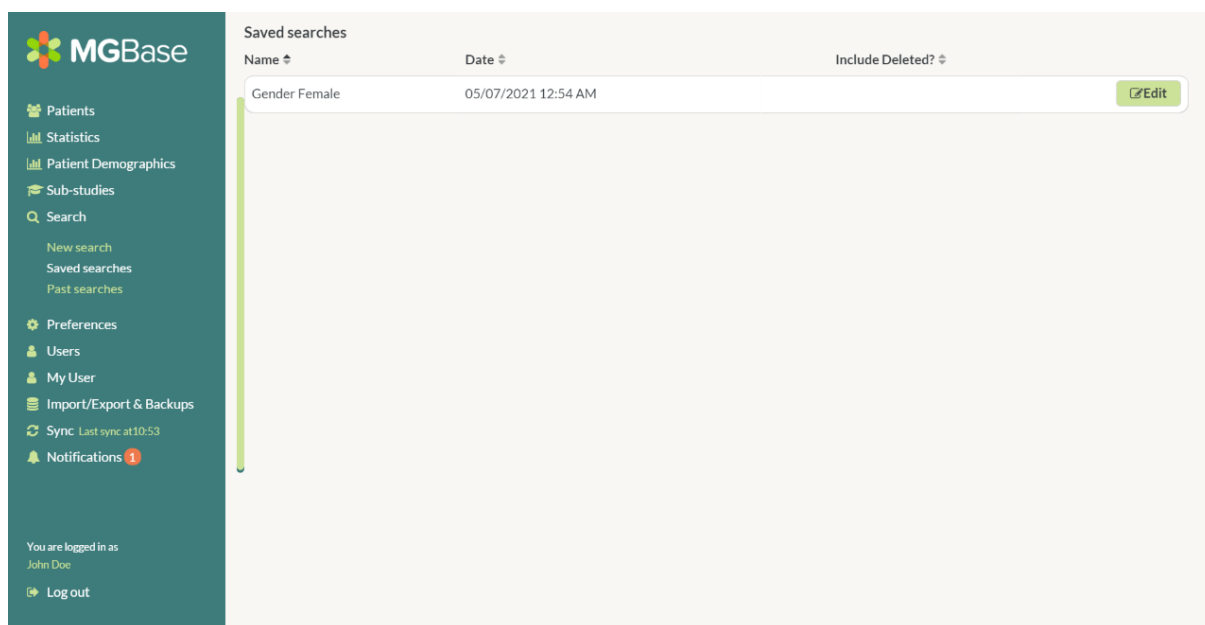


Figure 68 – iMed Web Saved Search

Good to know!

Saved Searches, and Past Search History below, can be used as a search parameter. This makes finding the union or intersection of two or more search results/history easy. Below we look for all Females or all Females with a Red Cell Count > 5 or all Females with a White Cell Count > 5 by searching a set of saved searches.

Or	+Group
Search	Saved
Search	Saved
Search	Saved

In	Gender Female	X	-
In	All Females with Red Cell Count > 5	X	-
In	All Females with White Cell Count > 5	X	-

12.4. Past Search History

Past Search History allows you to view and reapply previous searches performed in iMed Web. By clicking on the search, the results of the search are recalled and displayed.

Good to know!

What is the difference between the Search History (Past Searches) and Saved Searches? A Saved Search is **dynamic**, and the patients that are responsive to your search will change as your data changes, while the Search History is **static**, and will recall the original results.

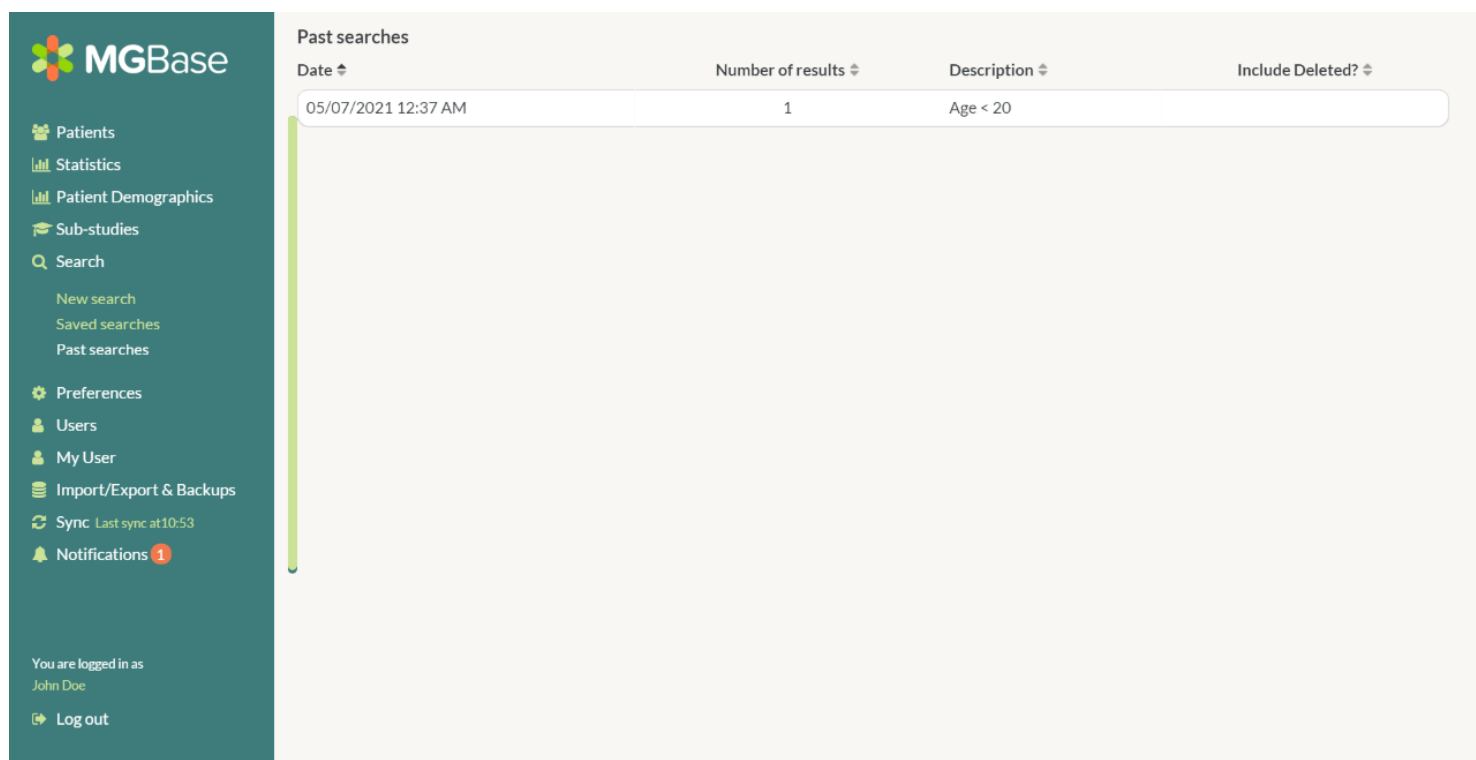


Figure 69 - Search History in iMed Web

12.1. Searching MedDRA

MedDRA can be searched in the same way as other fields. Refer to the earlier sections on the structure of MedDRA and multiaxiality to ensure that the searches are structured correctly. In the below example, *Small Cell Lung Cancer* will have multiple SOC, HLGT, HLT values.

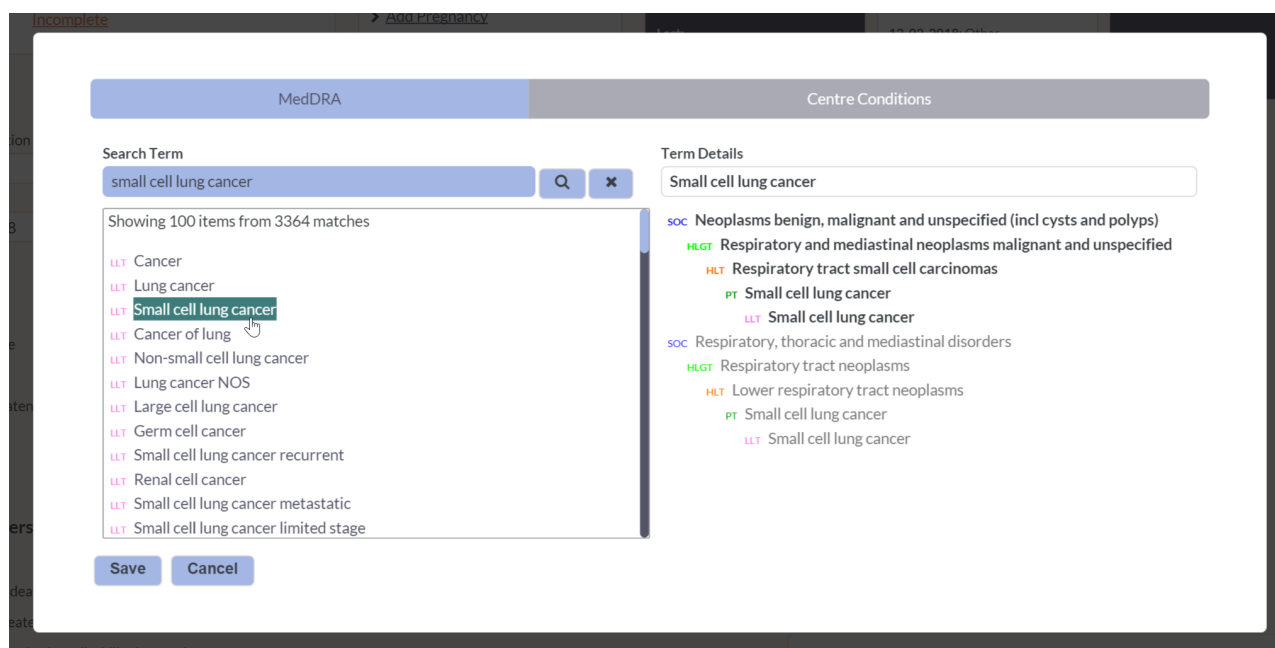


Figure 70 - MedDRA Small Cell Lung Cancer

Hence the any one of the below 10 searches would return a patient with *Small Cell Lung Cancer*.

MedDRA	All events	System Organ Class (SOC)	=	Neoplasms benign, malignant ...	-
MedDRA	All events	High Level Group Terms (HLGT)	=	Respiratory and mediastinal n...	-
MedDRA	All events	High Level Terms (HLT)	=	Respiratory tract small cell car...	-
MedDRA	All events	Preferred Terms (PT)	Contains	small cell lung cancer	-
MedDRA	All events	Lowest Level Terms (LLT)	Contains	small cell lung cancer	- +
MedDRA	All events	System Organ Class (SOC)	=	Respiratory, thoracic and medi...	-
MedDRA	All events	High Level Group Terms (HLGT)	=	Respiratory tract neoplasms	-
MedDRA	All events	High Level Terms (HLT)	=	Lower respiratory tract neopla...	-
MedDRA	All events	Preferred Terms (PT)	Contains	small cell lung cancer	-
MedDRA	All events	Lowest Level Terms (LLT)	Contains	small cell lung cancer	- +

13. User Options

13.1. Overview

This section explains how iMed Web handles the roles in the Registry and iMed Web. All users of iMed Web must be a member of the MGBase Registry.

13.2. User Permissions

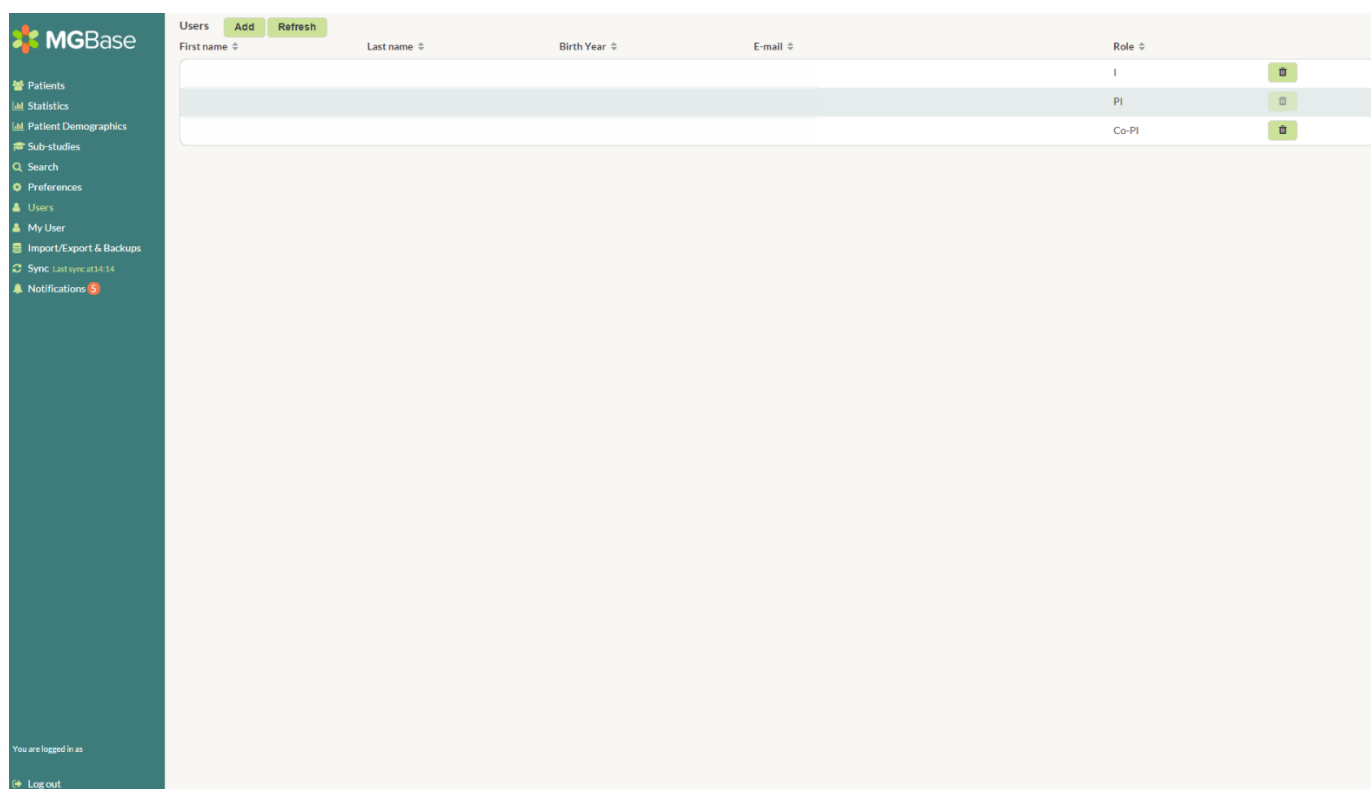
13.2.1. Roles

There are 4 roles that a user can be assigned in iMed Web.

- **Principal Investigator (PI):** This role is assigned to the lead Neurologist of the centre. The PI is responsible for understanding and signing the MGBase Foundation governance documentation and ensuring their centre adheres to all rules and conditions of participation. This role can perform tasks such as: Creating a Sub-study, joining a Sub-study, managing a Sub-Study as well as managing their centre, including inviting new users, removing users and modifying user roles. Each centre has one PI.
- **Co-Principal Investigator (Co-PI):** A PI may assign other senior members at their centre as a Co-PI should they wish to delegate administrative responsibilities. A Co-PI can perform the same functions as a PI, with the exception of creating a new sub-study. A centre can have multiple Co-PIs.
- **Investigator:** This role is usually assigned to medical or research staff who [create and modify patient data in iMed Web](#) and enrol patients into sub-studies. As Investigators have the ability to contribute data, they can be listed as co-authors in MBase publications if approved by the centre PI.
- **Member:** This role is usually assigned to staff who provide administrative assistance within the centre. Members do not hold the authority to upload patient data or enrol patients into sub-studies and therefore cannot be listed as a co-author in publications.

13.3. Viewing users

The list of users that can access iMed Web can be found in the Users section of iMed Web.



Users				
Add Refresh				
First name	Last name	Birth Year	E-mail	Role
				I
				PI
				Co-PI

Figure 71 - Users List

13.4. Adding users

A user can be added by a PI or a Co-PI by selecting the Add option in the User section. Enter the new users email address, role and permissions and then Add User.

- Patients
- Statistics
- Patient Demographics
- Sub-studies
- Search
- Preferences
- Users
- My User
- Import/Export & Backups
- Sync Last sync at 14:20
- Notifications 5

You are logged in as
 Log out

Add User

E-mail

mytestemail@gmail.com

Role

Investigator

Add User

Cancel

Principal Investigator (PI): This role is assigned to the lead Neurologist of the centre. The PI is responsible for understanding and signing the MSBase Foundation governance documentation and ensuring their centre adheres to all rules and conditions of participation. This role can perform tasks such as: Creating a Sub-study, Joining a Sub-study, Managing a Sub-Study as well as managing their centre, including inviting new users, removing users and modifying user roles. Each centre has one PI.

Co-Principal Investigator (Co-PI): A PI may assign other senior members at their centre as a Co-PI should they wish to delegate administrative responsibilities. A Co-PI can perform the same functions as a PI, with the exception of creating a new sub-study. A centre can have multiple Co-PIs.

Investigator: This role is usually assigned to medical or research staff who assist to upload patient data and enrol patients into sub-studies. As Investigators have the ability to contribute data, they can be listed as co-authors in MSBase publications if approved by the centre PI.

Member: This role is usually assigned to staff who provide administrative assistance within the centre. Member's do not hold the authority to upload patient data or enrol patients into sub-studies and therefore cannot be listed as a co-authors in publications.

Figure 72 - Adding a user

The new user will now receive an email with a unique sign-up link. After they complete the new user form at the supplied link they will be able to log into the iMed Web using their email and entered password.

If the user has not yet signed up, then they will appear in your Users table as a user without any information. If they have lost the sign-up link email, then you are able to re-invite them with a new email.

If the member is already a member of MGBase, then they will be automatically added and will not need to complete a new user form.

- Patients
- Statistics
- Patient Demographics
- Sub-studies
- Search
- Preferences
- Users
- My User
- Import/Export & Backups
- Sync Last sync at 14:28
- Notifications 5

You are logged in as
 Log out

Users

Add

Refresh

First name	Last name	Birth Year	E-mail	Role	
				I	
				PI	
				Co-PI	
				I	Re-invite

Figure 73 - New user and re-invite mechanism

13.5. Removing users

A user may no longer need access to your site and must be removed. To remove a user, simply click the trashcan icon and confirm the removal.

Note that in order to change the role of a user, the role for the relevant user can be changed by a PI, for example, an Investigator may become a Co-PI. By removing the user and re-adding as a Co-PI, this functionality can be achieved. The user will still be able to use the original login/password combination.

If the user is a member of multiple sites, then deleting will only remove the user from your centre. The user's access at other centres will not be affected.

14. My User Profile

14.1. Overview

Your patient profile is accessible in both iMed Web and the Registry. You can update your details by selecting the My User section and updating as required. Once updates have been completed, then click save.

It is important to realise that your iMed Web profile and your Registry profile is the same thing. That is, if you update your password in iMed Web, the password for the Registry will also be updated.

MGBase

Patients

Statistics

Patient Demographics

Sub-studies

Search

Preferences

Users

My User 1

Import/Export & Backups

Sync

Notifications 1

Basic Info

Title

Mr

First Name

John

Sex

Male

Female

Profession Role

Lead Neurologist

Comments

Birth Year

1994

E-mail

dusko.stupar@neumath.univ.rs

Last Name

Doe

Country of practice

AUSTRALIA

Password

Current Password

Password

Password Confirm

Professional Details

University/Medical school

Test Medical School

MS research interests

Select an option

Neurological specialties

Select an option

EDSS Certification

Neurostatus

Affiliation for publications purposes

Affiliation

Year of Highest medical degree

2012

Other MS research interests

Other neurological specialties

EDSS certification date

28/11/2012

Save

Cancel

You are logged in as
Dusko Stupar

Log out

Figure 74 - My User profile

14.2. Export overview

Patient data may be exported to CSV or XLSX (Excel) format. iMed Web will export your patients that are currently displayed. By default, this will be all patients. You can export a subset of your patient by first applying a filter/search and then exporting the results.

Alternatively, you can export an individual patient.

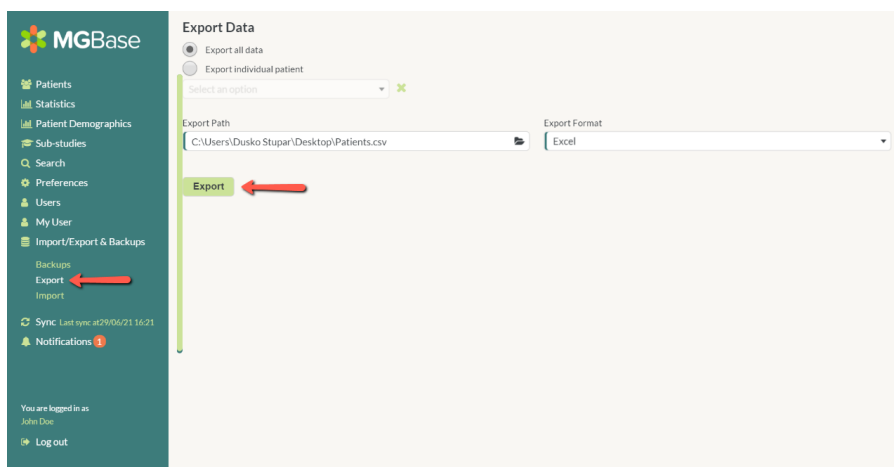


Figure 76 – iMed Web Export a patient

15. Synchronisation

15.1. Synchronisation overview

iMed Web synchronises any changes of Registry enrolled patient with the MGBase Registry. By default, automatic synchronisation is turned off. MGBase recommends enabling automatic synchronisation (by selecting the checkbox on the sync page). Automatic synchronisation will occur whenever a patient is saved and only the data for that enrolled patient will be sent. If automatic synchronisation is turned off, then you must manually sync the patients by selecting Sync Now.

All synchronisation events will occur in the background and will not affect normal iMed Web usability.

Good to know!

To get the most out of iMed Web and to ensure your patients are up to date, make sure Automatic Synchronisation is enabled for your centre by checking the option in the Sync section.

Sync

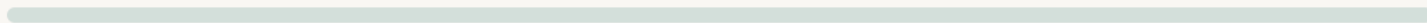
Sync now



Automatically sync to Registry?

Synchronisation started at 29/06/2021 16:21:16

0%complete





Patients

Statistics

Patient Demographics

Sub-studies

Search

Preferences

Users

My User

Import/Export & Backups

Sync: Synchronising...0%complete

Notifications 1

You are logged in as
John Doe

Log out

Sync

Sync now

☒ Automatically sync to Registry?

Synchronisation started at 05/07/2021 10:52:11

0%complete

Pending changes

Type	Name	Timestamp	Error?

Recent changes

☐ Show sync errors?

There are no recent changes

Figure 77 – iMed Web Synchronisation

16. Notifications

16.1. Notification types

Notifications are sent to iMed Web from the Registry to inform you of new sub-studies, any outstanding sub-study requirements, back-up notifications and any other miscellaneous issues. New notifications will be indicated by an orange notification symbol. To dismiss notifications (and remove the orange icon), simply click on the notification.

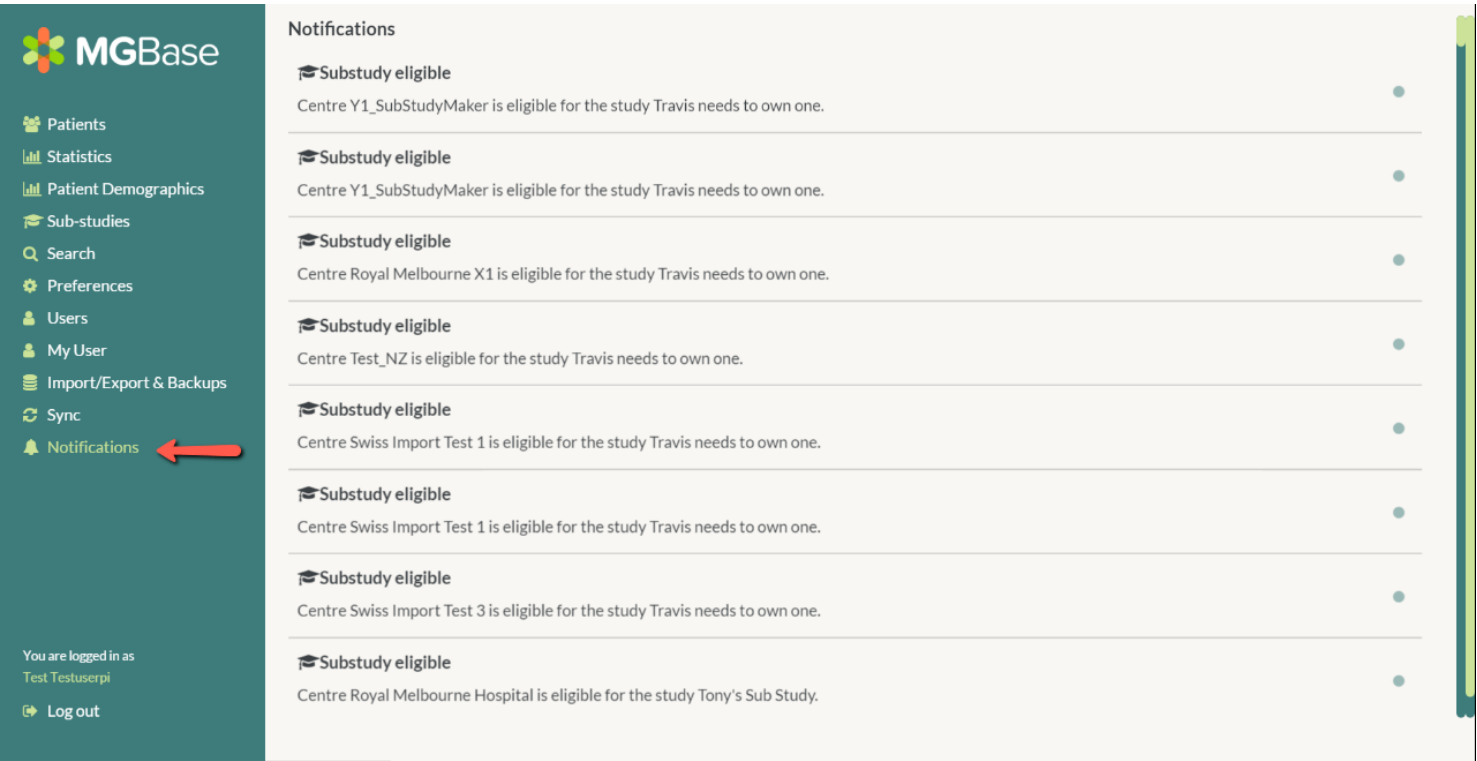


Figure 78 - Notifications in iMed Web