

## THOMSON MICROMEDEX

**Editorial Workflow**

Over 100 full-time editorial staff members, including physicians, clinical pharmacists, nurses, and other allied health professionals as well as medical librarians, are involved in the multi-step process to create and review the content in Thomson Micromedex products.

Under the direction of the Chief Medical Officer, our editorial staff is also trained in the identification of relevant literature and accepted literature evaluation techniques that assess methodological rigor, appropriateness of statistical analyses, as well as clinical relevance. These literature evaluation skills, in conjunction with clinical judgment, are employed throughout the content creation and review process presented below.

All Thomson Micromedex content in proprietary products is developed in accordance with documented Thomson Micromedex editorial policies and procedures. Our content facilitates the practice of evidence-based medicine whereby the clinician can identify best practices and choose the most appropriate treatment plan for a specific patient.

**STEP 1: IDENTIFICATION OF LITERATURE AND TOPICS FOR INCLUSION**

The senior Thomson Micromedex editorial staff considers many factors when selecting subjects for our databases. Topics chosen for further research are based on ongoing review of the world's medical journals, clinical judgment and recommendations, regulatory standards and compliance, national healthcare trends, FDA approvals, editorial board suggestions, external requests, and policy changes in health and disease management from professional health organizations.

The foundation of our ongoing literature surveillance is an automated literature query designed and monitored by an internal medical library staff and senior Thomson Micromedex editorial staff. This literature evaluation process comprises three levels: surveillance, title and abstract analysis, and full-text analysis. This three-step approach supports objective and systematic selection of the most important evidenced-based research.

Selected literature is prioritized and launched into the editorial workflow for content creation.

**STEP 2: CREATION OF CONTENT**

Primary literature identified in Step 1 is forwarded to a clinical writer to further assess the appropriateness of inclusion in our databases. This additional assessment is based on accepted literature evaluation techniques and includes an analysis of methodological rigor, application of statistics, and clinical relevance.

If deemed appropriate for inclusion, the information is summarized in our proprietary, state-of-the-art Content Management System. Clinical writers adhere to internal style guides, policies, and procedures to create accurate, consistent content.

Once written, new content is forwarded for internal review.

Our clinicians are trained and experienced in a wide range of specialties including, but not limited to:

- » Internal Medicine
- » Oncology
- » Geriatrics
- » Pediatrics
- » Emergency Medicine
- » Toxicology
- » Clinical Pharmacokinetics
- » Alternative Medicine

(continued)

## EDITORIAL WORKFLOW (CONT)

### STEP 3: INTERNAL REVIEW OF CONTENT

An internal senior clinical staff member reviews new content. The review assesses clinical accuracy and relevance as well as adherence to internal style guides, policies, and procedures.

Content creation and review is an iterative process by which the reviewer provides feedback to the writer. Content may cycle through the creation and review process several times before moving to the next step. This promotes continuous learning and serves to ensure our content is of the highest quality.

The Chief Medical Officer is ultimately responsible for the content output by the Thomson Micromedex editorial team. The senior clinical staff and internal experts regularly meet with the Chief Medical Officer to validate content decisions and to ensure inter-rater reliability within the group.

### STEP 4: THOMSON MICROMEDEX EDITORIAL BOARD

Certain topics may undergo additional review by a Thomson Micromedex Editorial Board.

### STEP 5: FINAL CLINICAL REVIEW AND PROMOTION TO PRODUCTION

An internal senior clinical staff member performs a final review of the content, taking into account any feedback received from the Editorial Board. Content is promoted to production and is available for release in Thomson Micromedex products.

The Thomson Micromedex editorial staff is dedicated to the integrity of our information.



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