

Appendix 1: Characteristics of clinical indicators, 2012 - 2013

Indicator ID	Indicator Description	Age Inclusion Criteria	No. of Sites			Level of Evidence or Strength of recommendation [#]	Phase of Care	Quality Type*
			GP	ED	IP			
URTI01	Children who presented with URTI symptoms had the presence of a runny nose (rhinorrhea) documented.	0 - 15 years	81	34	25	Consensus-based recommendation	Diagnosis	Underuse
URTI02	Children who presented with URTI symptoms had the presence of a cough documented.	0 - 15 years	81	34	25	Consensus-based recommendation	Diagnosis	Underuse
URTI03	Children who presented with URTI symptoms had the presence of a fever documented.	0 - 15 years	81	34	25	Consensus-based recommendation	Diagnosis	Underuse
URTI04	Children who presented with an URTI had their comorbidities documented.	0 - 15 years	81	34	25	Consensus-based recommendation	Diagnosis	Underuse
URTI05	Children who presented with an URTI had their previous medical history documented.	0 - 15 years	81	34	25	Consensus-based recommendation	Diagnosis	Underuse
URTI06	Children who presented with an URTI had their current medications documented.	0 - 15 years	81	34	25	Consensus-based recommendation	Diagnosis	Underuse
URTI07	Children who presented with an URTI had a physical examination.	0 - 15 years	81	34	25	Consensus-based recommendation	Diagnosis	Underuse
URTI08	Parents of children with an URTI were advised against antibiotics as they are likely to make little difference to the symptoms.	0 - 15 years	81	31	22	Consensus-based recommendation	Treatment	Underuse
URTI09	Parents of children with an URTI were advised against antibiotics as they may have side effects.	0 - 15 years	81	30	22	Consensus-based recommendation	Treatment	Underuse
URTI10	Children with an URTI and pneumonia were prescribed antibiotics.	0 - 15 years	24	12	4	Consensus-based recommendation	Treatment	Underuse
URTI11	Children with an URTI and a peritonsillar abscess were prescribed antibiotics.	0 - 15 years	7	2	0	Consensus-based recommendation	Treatment	Underuse
URTI12	Children with an URTI and bordetella pertussis were prescribed antibiotics.	0 - 15 years	8	5	1	Consensus-based recommendation	Treatment	Underuse
URTI13	Children with an URTI and acute moderate/severe bacterial sinusitis were prescribed antibiotics.	0 - 15 years	14	1	3	Consensus-based recommendation	Treatment	Underuse

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URTI14	Parents of children with an URTI were advised to return if the condition worsens or becomes prolonged.	0 - 15 years	81	34	24	Consensus-based recommendation	Ongoing management	Underuse

Legend: ID=Identifier; GP=General Practitioner; ED=Emergency Department; IP=Inpatient.

[#] Strength of recommendation as reported in individual CPGs. CPGs used a variety of classification schemes for allocating Strength of Recommendation in 'Grades' or Level of Evidence in 'Levels'. If strength of recommendation, or level of evidence, were not specified in the CPG, the term "Consensus-based recommendation" was assigned.

* The type of quality of care assessed was classified as underuse or overuse: underuse refers to actions which are recommended, but not undertaken; overuse refers to actions which are not indicated, or are contraindicated, in the context of the indicator's inclusion criteria.