studies were included in the review by two independent reviewers. Anything published before 2006, that was not a research article (other than the guidelines), and/or that did not provide new recommendations (that is, a review of another set of recommendations) was excluded.

RESULTS:

After collecting data on the suggested reporting elements described in the literature, we pooled our results to create an overarching list of the most commonly recommended elements to describe and the most commonly recommended methods to use when documenting a comprehensive search. Not only did these elements pertain to documenting the search strategy for the final report, but they also pertained to the protocol and the abstract of a review.

CONCLUSIONS:

It is hoped that this overview of the literature and compilation of the evidence will clarify some of the confusion that seems to exist when documenting and reporting searches and perhaps it will even help to reduce the existence of poorly described strategies in the research literature.

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VP201 From A Systematic Review To Addressing Evidence Gaps

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INTRODUCTION:

In both health care and social services it is important to continuously summarize and analyze existing research in the form of systematic reviews. At the Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU) (www.SBU.se) we collect the evidence gaps identified by systematic reviews in a database. These evidence gaps are methods used in health care/social services for which there is not enough good quality research available. By analyzing this database we can highlight populations or methods where evidence gaps are more frequent. This knowledge can be used to find areas that might need assistance in developing research structure and also when arranging research prioritization processes involving patients, consumers and clinicians.

METHODS:

Systematic reviews and evidence maps (methodical collections of systematic reviews) are used by SBU to identify evidence gaps. SBU has adapted the James Lindh alliance approach to give patients, consumers, relatives and clinicians the opportunity to give their view of what research they find most important to execute. SBU also collaborates with governmental research funders to communicate the content of the SBU database.

RESULTS:

A prioritizing process regarding evidence gaps within Attention Deficit Hyperactivity Disorder (ADHD)-treatment has been finalized (1). This was accomplished by people with ADHD and caretakers, as well as clinicians and staff. Another prioritization process on the topic of treatments for injuries after vaginal birth is ongoing. In November 2016 the Swedish

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government presented the research policy bill where they, based on analyses of the SBU database, pointed out areas of specific importance in future research.

CONCLUSIONS:

It is of great importance that evidence gaps get addressed and that new research is promoted in order to fill these gaps. In areas where there are numerous gaps, prioritizations involving different stakeholders is needed. Considering areas with large amounts of evidence gaps the primary focus might be on building infrastructure surrounding research before research calls can be directed towards these areas.

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VP203 Performance Evaluation Of Eye-Tracking Devices

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INTRODUCTION:

There are different devices, systems and technologies for people with disabilities. It's necessary to provide information on the effectiveness of products in the market and competitiveness in terms of price-quality, and providing an endorsement in the acquisition of technologies that improve their quality of life. The use of eye tracking devices is growing and its implementation in different areas has attracted the attention of several developers. Therefore the need to generate a product that evaluates the functionality of such devices is necessary in order to avoid unnecessary expenses when acquiring or repairing one of these devices.

METHODS:

An interface was created with different functionalities such as the location of the coordinates in which the pointer is located, standardized graphic interface design to provide statistical data that allow an objective result for its subsequent analysis and an endless number of design possibilities.

The tests performed were of accuracy and precision where the subject was asked to follow the instructions given and observe a sequence of points, especially the points located at the ends of the monitor as these are the critical points in which there is less coincidence between the cursor and the gaze.

RESULTS:

The results obtained provided information on the performance of the tracking device. In this way it was possible to establish that the accuracy of the ocular tracker: it was $\pm$ 12.83 pixels on the horizontal axis and $\pm$ 10.66 pixels on the vertical axis. The precision was $\pm$ 9.8 pixels on the horizontal axis and $\pm$ 14.23 pixels on the vertical axis.

This shows the use phenomenon caused due to the limited mobility of the eyes in the vertical axis in comparison to the horizontal mobility. The precision data obtained indicate that, because the movement on the vertical axis is smaller, there is a less continuous spectrum of positions on the axis, which translates to less precision.

CONCLUSIONS:

The data obtained can be used to compare with the results of the test with other eye tracking devices and thus this could serve as a tool to select an eye tracking device according to the user's need and his economical capabilities.

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