LEGEND Evidence Appraisal of a Single Study

Prognosis

Cross-Sectional Study



Rev	riewer:	Today's Date:	Final	Evidence	Level:
	ject/Topic of your Clinical Question:				
	cle Title:		lournalı		
Yea	ır: First Author:		Journal:		
ansv	he study aim/purpose/objectives and ind vering your clinical question? Study Aim/Purpose/Objectives:	clusion/exclusion criteria assist in	□ Yes	□ No	□ Unknown
• li	nclusion Criteria:				
• E	Exclusion Criteria:				
	cross-sectional study congruent with th ctives above?	e author's study aim, purpose, or	□ Yes	□ No	□ Unknown
obje	ctives above:				- Cirkiiowii
If yo	en reading the bolded questions, consider the uncertain of your skills in evidence experts emiliar terms can be found in the LEGEND	valuation, please consult a local evider	•		e:
Va	lidity Are the resul	ts of the Cross-Sectional Study val	id or credible	e?	
1.	 Are the study methods clearly describe Is the setting clearly described and appropressor Was there a representative sample of patie Is the sample population clearly described and Were the participants recruited prospective 	iate? nts at a well-defined point in the course of and sufficient?		□ No	□ Unknown
2.	Were all potentially important prognos • Were the patients sufficiently homogeneous	s with respect to prognostic risk?	☐ Yes	□ No	☐ Unknown
3.	 Are there subgroups in the sample with very Were objective and unbiased outcome 		In the	□ No	☐ Unknown
•	Were the outcomes quantifiable and precise				
	Were instruments used to measure the outcome.				
4.	 Was the assessment of the outcome made Were all participants accounted for at 				
4.	 Were withdrawals from the study explained Was the rate of attrition acceptable? 		☐ Yes	□ No	□ Unknown
5.	Was there freedom from conflict of int • Sponsors, Funding Agency, Investigators	erest?	☐ Yes	□ No	☐ Unknown
Con	nments on Study Validity:				
Re	liability Are these va	lid study results important?			
6.	 Were the statistical analysis methods Were the statistical analysis methods clearl If subgroups in the sample had different procomorbidity), was an adjustment made for th Does the prognosis change by age? 	y described? ognostic factors <i>(e.g., demographics, disease</i> s	☐ Yes specifics,	□ No	□ Unknown
7.	Did the study have a sufficiently large Was a power analysis described? Did the sample size achieve or exceed that Did each subgroup also have sufficient same	resulting from the power analysis?	□ Yes	□ No	□ Unknown

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8.	What are the main results of the study? (e.g., Helpful data: Page #, Table #, Figures, Grae. How likely are the outcomes over time?	phs)							
	Absolute results (e.g., 5-year survival rate) or Relative results (e.g., risk from prognostic factor) or Survival C	Curves (e.g., cı	ımulative eve	nts)					
	 What were the measures of statistical uncertainty (e.g., precision)? (Were the results presented with Confidence Intervals or Standard Deviations?) 								
	(Were the results presented with confidence intervals of standard beviations:)								
	Ware the recults statistically significant?								
9. 10.	Were the results statistically significant? Were the results clinically significant?	☐ Yes	□ No	☐ Unknown ☐ Unknown					
10.	 If potential confounders were identified, were they discussed in relationship to the results' 			□ Ulikilowii					
Con									
Con	nments on Study Reliability:								
Λn	plicability Con Languethaca valid impartant at why manufactor	may a potio m	(a.2)						
Aþ	Applicability Can I apply these valid, important study results to my patients?								
11.	Can the results be applied to my population of interest?	☐ Yes	□ No	☐ Unknown					
	 Is the setting of the study applicable to my population of interest? Do the patient outcomes apply to my population or question of interest?								
	 Were the patients in this study similar to my population of interest? 								
12.	Are my patient's values and preferences satisfied by the knowledge gained	☐ Yes	□ No	□ Unknown					
10	from this study (such as outcomes considered)?								
13.	Would you include this study/article in development of a care recommendation?	□ Yes	□ No	☐ Unknown					
Con	nments on Study Applicability:								
	,, , , , , , , , , , , , , , , , ,								
Δd	ditional Comments or Conclusions ("Take-Home Points")								
710	ditional definitions of deficitations (rake frome romes)								
Qu	ality Level / Evidence Level								
•	Consider each "No" answer and the degree to which this limitation is a threat to the validity of	the results,	then check	k the					
	appropriate box to assign the level of quality for this study/article.								
	Consider an "Unknown" answer to one or more questions as a similar limitation to answering in the article.	"No," if the ir	nformation	is not available					
The	Evidence Level is:								
	☐ Good Quality Cross-Sectional Study	[4a]							
	☐ Lesser Quality Cross-Sectional Study	[4b]							
	□ Not Valid Reliable or Applicable								

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Table of Evidence Levels													
		TYPE OF STUDY / STUDY DESIGN											
DOMAIN OF CLINICAL QUESTION	Systematic Review Meta–Analysis	Cohort - Prospective	Cohort – Retrospective	Case – Control	Cross – Sectional	Descriptive Study Epidemiology Case Series	Mixed Methods Study	Decision Analysis Economic Analysis Computer Simulation	Guidelines	Case Reports N-of-1 Study	Bench Study	Published Expert Opinion	Local Consensus Published Abstracts
Prognosis	1a 1b	2a 2b	3a 3b	4a 4b	4a 4b	4a 4b	2/3/4 a/b	5a 5b	5a 5b	5a 5b	5a 5b	5a 5b	5

Development for this appraisal form is based on:

- 1. Guyatt, G.; Rennie, D.; Evidence-Based Medicine Working Group.; and American Medical Association.: Users' guides to the medical literature: a manual for evidence-based clinical practice. Users' guides to the medical literature: a manual for evidence-based clinical practice: "JAMA & archives journals." Chicago, IL, 2002
- 2. Melnyk, B. M. and E. Fineout-Overholt (2005). Evidence-based practice in nursing & healthcare: a guide to best practice. Philadelphia, Lippincott Williams & Wilkins.
- 3. Lohr, K. N. and T. S. Carey (1999). "Assessing "best evidence": issues in grading the quality of studies for systematic reviews." Joint Commission Journal on Quality Improvement 25(9): 470-9.
- 4. Fineout-Overholt, E. and L. Johnston (2005). "Teaching EBP: asking searchable, answerable clinical questions." Worldviews Evid Based Nurs 2(3): 157-60.
- 5. Jerosch-Herold, C. (2005). "An evidence-based approach to choosing outcome measures: a checklist for the critical appraisal of validity, reliability and responsiveness studies." British Journal of Occupational Therapy 68(8): 347-53.
- Phillips, et al: Oxford Centre for Evidence-based Medicine Levels of Evidence, 2001. Last accessed Nov 14, 2007 from http://www.cebm.net/index.aspx?o=1025.
- 7. Fineout-Overholt and Johnston: Teaching EBP: asking searchable, answerable clinical questions. Worldviews Evid Based Nurs, 2(3): 157-60, 2005.
- 8. Clark, E., Burkett, K., & Stanko-Lopp, D. (2009, Dec). Let Evidence Guide Every New Decision (LEGEND): an evidence evaluation system for point-of-care clinicians and guideline development teams [CCHMC LEGEND development]. J Eval Clin Pract, 15(6), 1054-1060.