

#### **LEGEND: Evidence Appraisal of a Single Study Etiology, Risk Factors, Incidence**

**Cohort Study** – Prospective or Retrospective

Pro	ject/Topic of your Clinical Question:											
	viewer:	Today's Date: Fin										
	cicle Title:	First Author:	Journal:									
Yea	ar: 	First Author:	Journal:									
Do	Do the study aim/purpose/objectives and inclusion/exclusion criteria assist in answering your clinical question?  — Yes — No — Unknown											
	Study Aim/Purpose/Objectives:											
	• Inclusion Criteria:											
	• Exclusion Criteria:											
Is a cohort study congruent with the author's study aim/purpose/objectives above? Yes No Unknown Comments:												
When reading the bolded questions, consider the bulleted questions to help answer the main question.  If you are uncertain of your skills in evidence evaluation, please consult a local evidence expert for assistance:  CCHMC Evidence Experts  Unfamiliar terms can be found in the LEGEND Glossary.												
VA	ALIDITY: ARE THE RESULTS OF THE COH	ORT STUDY VALID?										
1.		rticipants similar (homogeneous) with respengraphic, exposure, risk, treatment, or etiology)?	ct Yes No Unknown									
2.	Were treatments/exposures and clinical each group?  Comments:	cal outcomes measured in the same way	in Yes No Unknown									
3.	Was the assessment of outcomes obj  Comments:	ective or blinded to factors of interest?	Yes No Unknown									
4.	<ul> <li>Were participants followed long enough</li> <li>Was the follow-up process concentres:</li> </ul>	arly described?	☐ Yes ☐ No ☐ Unknown									



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J.	If the study addresses causation, was there a plausible association between
	exposure and outcome?
	<ul> <li>Does the association make biological sense?</li> </ul>
	<ul> <li>Is it clear that the exposure preceded the onset of the outcome?</li> </ul>
	<ul> <li>Was the amount of exposure associated with the severity of outcome (i.e., dose-response)?</li> </ul>
	<ul> <li>Was re-exposure associated with the outcome (i.e., challenge or dechallenge-rechallenge)?</li> </ul>
	Comments:
6.	Were all participants accounted for at the conclusion of the study?
	Were withdrawals from the study explained?
	Was the rate of attrition acceptable?
	Comments:
7	Was there freedom from conflict of interest?
/.	<ul> <li>Was there freedom from conflict of interest?</li> <li>Sponsor/Funding Agency or Investigators</li> </ul>
	Comments:
RE	LIABILITY: Are these Valid Study Results Important?
8.	Did the study have a sufficiently large sample size? YesNoUnknown
	Was a power analysis described?
	<ul> <li>Did the sample size achieve or exceed that resulting from the power analysis?</li> </ul>
	<ul> <li>Did the sample size achieve or exceed that resulting from the power analysis?</li> <li>Did each subgroup also have sufficient sample size (e.g., at least 6 to 12 participants)?</li> </ul>
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9.	<ul> <li>Did the sample size achieve or exceed that resulting from the power analysis?</li> <li>Did each subgroup also have sufficient sample size (e.g., at least 6 to 12 participants)?         Comments:         Were the statistical analysis methods appropriate?</li></ul>
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	<ul> <li>Did the sample size achieve or exceed that resulting from the power analysis?</li> <li>Did each subgroup also have sufficient sample size (e.g., at least 6 to 12 participants)?         Comments:         </li> <li>Were the statistical analysis methods appropriate?         Were the statistical analysis methods clearly described?         If subgroups were evaluated, was a statistical adjustment made for the differences?         Comments:     </li> <li>What are the main results of the study? (e.g., Helpful data: Page #, Table #, Figures, Graphs)</li> </ul>



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• For an Incidence Study: What is the rate? (e.g., number per population per year or other time period)							
<ul> <li>What were the measures of statistical uncertainty (e.g., precision)? (Were the results presented with Confidence Intervals or Standard Deviations?)</li> </ul>							
11. Were the results statistically significant?  Note: This question may not be applicable in all incidence studies.  Comments:	Yes No Unknown	1					
<ul> <li>12. Were the results clinically significant?</li> <li>If potential confounders were identified, were they discussed in relationship to the results?</li> <li>Comments:</li> </ul>							
APPLICABILITY: CAN I APPLY THESE VALID, IMPORTANT STUDY RESULTS TO TREATING MY PAT	rients?						
<ul> <li>13. Can the results be applied to my population of interest?</li> <li>Is the setting of the study applicable to my population of interest?</li> <li>Do the patient outcomes apply to my population or question of interest?</li> <li>Were the patients in this study similar to my population of interest? Comments:</li> </ul>	Yes No Unknown	1					
<ul> <li>13. Can the results be applied to my population of interest?</li> <li>Is the setting of the study applicable to my population of interest?</li> <li>Do the patient outcomes apply to my population or question of interest?</li> <li>Were the patients in this study similar to my population of interest?</li> </ul>	☐ Yes ☐ No ☐ Unknowr						
<ul> <li>13. Can the results be applied to my population of interest?</li> <li>Is the setting of the study applicable to my population of interest?</li> <li>Do the patient outcomes apply to my population or question of interest?</li> <li>Were the patients in this study similar to my population of interest? Comments:</li> <li>14. Are my patient's and family's values and preferences satisfied by the knowledge gained from this study (such as outcomes considered)?</li> </ul>	Yes No Unknown	1					



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#### **QUALITY 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 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 "No," if the information is not available in the article.

		Etiology / Risk Factors	Incidence
THE EVIDENCE LEVEL IS:	Good Quality Prospective Cohort Study:	[3a]	[2a]
	Lesser Quality Prospective Cohort Study:	[3b]	[2b]
	Good Quality Retrospective Cohort Study:	[4a]	[3b]
	Lesser Quality Retrospective Cohort Study:	[4b]	[3b]
	Not Valid, Reliable, or Applicable		
	Table of Fridance Levels		

Table of Evidence Levels															
		TYPE OF STUDY / STUDY DESIGN													
DOMAIN OF CLINICAL QUESTION	Systematic Review Meta–Analysis	RCT⁺	נכו ₊	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
Etiology / Risk Factors	1a	<b>2</b> a	3a	3a	4a	4a	4a	4a	2/3/4	5a	5a	5a	5a	5a	5
	1b	2b	3b	3b	4b	4b	4b	4b	a/b	5b	5b	5b	5b	5b	
Incidence	1a			2a	<b>3</b> a			4a			5a	5a	5a	5a	5
	1b			2b	3b			4b			5b	5b	5b	5b	

\* RCT = Randomized Controlled Trial; CCT = Controlled Clinical Trial

#### 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. "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. 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.
- 4. Fineout-Overholt and Johnston: Teaching EBP: asking searchable, answerable clinical questions. Worldviews Evid Based Nurs, 2(3): 157-60, 2005.