

LEGEND: Evidence Appraisal of a Single Study Prognosis Cross—Sectional Study

Project/Topic of your Clini	cal Question:	
Reviewer:	Today's Date:	Final Evidence Level:
Article Title:		
Year:	First Author:	Journal:
Do the study aim/purpose • Study Aim/Purpo		a assist in answering your clinical question?
• Inclusion Criteria	ı:	
• Exclusion Criteria	а:	
Is a cross-sectional study of above? Comments:	congruent with the author's study aim/pur	rpose/objectives Yes No Unknown
If you are uncertain of your st CCHMC Evidence Experts: <u>h</u>	estions, consider the bulleted questions to help kills in evidence evaluation, please consult a locanttp://groups/ce/NewEBC/EBDMHelp.htm d in the LEGEND Glossary: http://groups/ce/Ne	al evidence expert for assistance:
VALIDITY: ARE THE RES	ULTS OF THE CROSS—SECTIONAL STUDY VALID O	OR CREDIBLE?
 Is the setting c Was there a re course of disea Is the sample p 	s clearly described and appropriate for the learly described and appropriate? spresentative sample of patients at a well-dease? copulation clearly described and sufficient? icipants recruited prospectively?	efined point in the
Were the patieAre there subg	nportant prognostic factors assessed? ents sufficiently homogeneous with respect groups in the sample with very different pro ps in the study?	. •



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Cross–Sectional Study

3.	 Were objective and unbiased outcome criteria used? Were the outcomes quantifiable and precisely measurable? Were instruments used to measure the outcomes tested to be valid and Was the assessment of the outcome made independent of knowledge of prognostic factors? Comments:		□ No	Unknown
4.	 Were all participants accounted for at the conclusion of the study? Were withdrawals from the study explained? Was the rate of attrition acceptable? Comments: 	Yes	□ No	Unknown
5.	 Was there freedom from conflict of interest? Sponsor/Funding Agency or Investigators Comments: 	Yes	□ No	Unknown
RE	ELIABILITY: Are these Valid Study Results Important?			
6.	 Were the statistical analysis methods appropriate? Were the statistical analysis methods clearly described? If subgroups in the sample had different prognostic factors (e.g., demograph disease specifics, comorbidity), was an adjustment made for the differences be Does the prognosis change by age? Comments:		□ No ups?	Unknown
7.	 Did the study have a sufficiently large sample size? Was a power analysis described? Did the sample size achieve or exceed that resulting from the power anal Did each subgroup also have sufficient sample size (e.g., at least 6 to 12 partice Comments: 	•	□ No	Unknown
8.	What are the main results of the study? (e.g., Helpful data: Page #, Table #, Figures, Grap	ohs)		
	 How likely are the outcomes over time? Absolute results (e.g., 5 year survival rate) or Relative results (e.g., risk from 			



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 What were the measures of statistical uncertainty (e.g., precision)? (Were the results presented with Confidence Intervals or Standard Deviations?) 			
9. Were the results statistically significant? Comments:	Yes	☐ No	Unknown
 Were the results clinically significant? If potential confounders were identified, were they discussed in relationship to the results? Comments: 	Yes	□ No	Unknown
APPLICABILITY: CAN I APPLY THESE VALID, IMPORTANT STUDY RESULTS TO TREATING MY PATIE	ENTS?		
 11. Can the results be applied to my population of interest? 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? Comments:	Yes	□ No	Unknown
12. Are my patient's and family's values and preferences satisfied by the knowledge gained from this study (such as outcomes considered)? Comments:	☐ Yes	☐ No	Unknown
13. Would you include this study/article in development of a care recommendation? Comments:	Yes	☐ No	Unknown
Additional Comments or Conclusions ("Take-Home Points"):			



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.

THE EVIDENCE LEVEL IS:	☐ Good Quality Cross-Sectional Study	[4a]
	Lesser Quality Cross-Sectional Study	[4b]
	☐ Not Valid, Reliable, or Applicable	

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: "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.