

Project/Topic of your Clinical Question: _____

Reviewer: _____ **Today's Date:** _____ **Final Evidence Level:** _____

Article Title: _____

Year: _____ **First Author:** _____ **Journal:** _____

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:

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: <http://groups/ce/NewEBC/EBDMHelp.htm>
 Unfamiliar terms can be found in the LEGEND Glossary: <http://groups/ce/NewEBC/EBCFiles/GLOSSARY-EBDM.pdf>

GENERAL QUESTIONS

1. Were qualitative designs identified? Yes No Unknown

- What were the qualitative designs? (*Check all that apply.*)

<input type="checkbox"/> Ethnography	<input type="checkbox"/> Focus Group
<input type="checkbox"/> Grounded Theory	<input type="checkbox"/> Narrative
<input type="checkbox"/> Phenomenology	<input type="checkbox"/> Other*:

** Case studies and descriptive studies with open ended questions provide qualitative information, but are not qualitative studies.
 Terms defined in EBP Glossary.*

Comments:

2. Is the area of study clearly stated in one sentence? Yes No Unknown

Comments:

3. Were the designs appropriate to explore the area of study being studied? Yes No Unknown

Comments:

4. Was a guiding framework identified? Yes No Unknown

Comments:

5. Was the guiding framework appropriate for the area of study being evaluated? Yes No Unknown

Comments:

6. Were participants selected in accordance with the needs of the study
(i.e., purposeful sampling)? Yes No Unknown
Comments:
7. Were the settings clearly identified for the area of study being studied? Yes No Unknown
 - Were the settings appropriate for the area of study being studied?
Comments:
8. Were the contexts of the participants analyzed using the words of the participants in all included studies? Yes No Unknown
Comments:

EVALUATION CRITERIA FOR QUALITATIVE STUDIES

CREDIBILITY: ARE THE FINDINGS CREDIBLE?

9. Was the credibility of included studies reported? Yes No Unknown
Comments:

CONFIRMABILITY: ARE THE FINDINGS VERIFIED WITHIN THE CONTEXT?

10. Did the researchers report how findings (*themes*) were confirmed? Yes No Unknown
 - How were findings confirmed? (*Check all that apply.*)
 - Participants
 - Experts
 - Reflections with Participants throughout Study
 - Use of Field Notes
Comments:

MEANING IN CONTEXT: ARE THE FINDINGS REPORTED WITHIN THE CONTEXT OF THE AREA OF STUDY?

11. Do the researchers discuss the essence (*meaning*) of the findings (*themes*) within the socio-cultural context? Yes No Unknown
 - Were the findings reported in terms of the context:
 - of the participants
 - of the culture / group
 - of the environment
Comments:

SATURATION: WAS THE DATA COLLECTED UNTIL THERE WAS NO NEW INFORMATION COMING FORTH?**12. Was saturation discussed and reached in the included studies?** Yes No Unknown*Comments:***RECURRENT PATTERNING: IS THERE CONSISTENCY IN REPEATED PATTERNS, THEMES, & ACTS OVER TIME?****13. Were the data analysis methods identified in the included studies?** Yes No Unknown*Comments:***14. Were the themes reported in terms of the theoretical framework?** Yes No Unknown

- Were the themes supported by raw data?
- Did the raw data fall into patterns?
- Were patterns reported as themes?

*Comments:***TRANSFERABILITY: ARE THE FINDINGS TRANSFERABLE?****15. Was this information gained from the study applicable to my patient population?** Yes No Unknown*Comments:*

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 rigor 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 Meta-Synthesis** [1a]
 Lesser Quality Meta-Synthesis [1b]
 Not Applicable or Credible

Table of Evidence Levels								
DOMAIN OF CLINICAL QUESTION	TYPE OF STUDY / STUDY DESIGN							
	Meta-Synthesis	Qualitative Study	Mixed Methods Study	Guidelines	Case Reports N-of-1 Study	Bench Study	Published Expert Opinion	Local Consensus Published Abstracts
Meaning / KAB*	1a 1b	2a 2b	2/3/4 a/b	5a 5b	5a 5b	5a 5b	5a 5b	5

* KAB = Knowledge, Attitudes, and Beliefs

Development for these appraisal forms are 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. Denzen, N. & Lincoln. Y. (2005). The Sage Handbook of Qualitative Research, Sage Publications: Thousand Oaks, California.
3. Freshwater, D. (2004). Deconstructing Evidence Based Practice, Routledge: New York: New York.
4. Guba, Y. & Lincoln, E. (1989). Fourth Generation Evaluation, Sage Publications: Newbury Park, California.
5. Leininger, M (1991). Culture care diversity and universality: A theory of Nursing, National League for Nursing Press: New York
6. Leininger, M. & McFarland, M. (2006). 2nd Ed. Culture care diversity and universality: A worldwide nursing theory. Jones & Bartlett Publishers: Sudbury, Mass.
7. Lincoln, Y. & Guba, E. (1985). Naturalistic Inquiry, Sage Publications: Newbury Park, California.
8. Morse, J., Swanson, J., & Kuzal, A. (2001). The Nature of Qualitative Evidence, Sage Publications: Thousand Oaks, California.
9. 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>.
10. Fineout-Overholt and Johnston: Teaching EBP: asking searchable, answerable clinical questions. *Worldviews Evid Based Nurs*, 2(3): 157-60, 2005.