

Project/Topic of your Clinical Question: _____
Reviewer: _____ **Today's Date:** _____ **Final Evidence Level:** _____
Article Title: _____
Year: _____ **First Author:** _____ **Journal:** _____

Do the study purpose/objectives and inclusion/exclusion criteria assist in answering your clinical question?
 Yes No Unknown

- Study Purpose/Objective:

- Inclusion Criteria:

- Exclusion Criteria:

Is a qualitative study congruent with the author's study purpose 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: <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. Was a qualitative design clearly identified?
 Yes No Unknown

- What was the qualitative design?

| | |
|--|--------------------------------------|
| <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. Was the design appropriate to explore the area of study being studied?
 Yes No Unknown

Comments:

4. Was the 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. Was the setting clearly identified for the area of study being studied? Yes No Unknown

- Was the setting appropriate for the area of study being studied?

Comments:

7. Was the context of the participants analyzed using the words of the participants? Yes No Unknown

Comments:

EVALUATION CRITERIA FOR QUALITATIVE STUDIES

CREDIBILITY: ARE THE FINDINGS CREDIBLE?

8. Was the researcher known and trusted by the participants? Yes No Unknown

- How was trust developed among the participants?
- How long was the researcher in the environment of the participants prior to collecting data?

Comments:

CONFIRMABILITY: ARE THE FINDINGS VERIFIED WITHIN THE CONTEXT?

9. Did the researcher report how findings (*themes*) were confirmed? Yes No Unknown

- How were themes confirmed?
 - 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?

10. Does the researcher discuss the findings (*themes*) within a 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?**11. Was saturation of data discussed and reached?**

- If yes, what was the sample size (*number of participants*)? _____
- If no, were there at least 10 participants ($N \geq 10$)?
- Was the sample size justified in the discussion?

Comments:

Yes No Unknown

Yes No Unknown

Yes No Unknown

RECURRENT PATTERNING: IS THERE CONSISTENCY IN REPEATED PATTERNS, THEMES, & ACTS OVER TIME?**12. Was the data analysis method identified?**

Comments:

Yes No Unknown

13. Were the themes reported in terms of the theoretical framework?

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

Comments:

Yes No Unknown

TRANSFERABILITY: ARE THE FINDINGS TRANSFERABLE?**14. Is this information gained from the study applicable to similar groups and contexts?**

Comments:

- What is applicable to my patient population?

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 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 Qualitative Study** [2a]
 Lesser Quality Qualitative Study [2b]
 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 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. 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 Part, 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.