

Grade	BOE for Each Clinical Question and Outcome (See "Worksheet" to summarize the BOE)		
<b>High</b> ⊕⊕⊕⊕  <i>Sufficient number of high quality studies with consistent* results</i>	NUMBER OF STUDIES	QUALITY OF STUDIES*	CONSISTENCY OF RESULTS*
	1 or more	1a	NA
		2a	Yes
	<ul style="list-style-type: none"> <li>• <b>strong designs</b> for answering the question addressed</li> <li>• <b>clinically important and consistent</b> results with minor exceptions at most</li> <li>• <b>free of any significant doubts about validity</b> (low risk of bias, generalizability, design flaws)</li> <li>• <b>adequate statistical power</b> (including studies showing no difference)</li> <li>• benefit is greater than any risk of harm</li> <li>• patient's values and preferences are supported or considered</li> </ul>		
<b>Confirmation</b>	Further research is unlikely to be conducted or change our confidence in the answer to the clinical question.		
<b>Moderate</b> ⊕⊕⊕○  <i>A single well-done trial, Multiple lesser quality trials, or Multiple large, high-quality observational studies</i>	NUMBER OF STUDIES	QUALITY OF STUDIES*	CONSISTENCY OF RESULTS*
	1 or more	1b or 2a	Yes
	3 or more	2b and/or 3a	Yes
	<ul style="list-style-type: none"> <li>• <b>clinically important and consistent</b> results with minor exceptions at most</li> <li>• <b>free of any significant doubts about validity</b> (low risk of bias, generalizability, design flaws)</li> <li>• <b>adequate statistical power</b> (including studies showing no difference)</li> <li>• <b>some uncertainty</b> due to <b>validity</b> threats (generalizability, bias, design flaws or adequacy of statistical power)</li> <li>• benefit is greater than any risk of harm</li> <li>• patient's values and preferences are supported or considered</li> </ul>		
<b>Confirmation</b>	Further research may have an impact on our confidence in the precision of the answer to the clinical question.		
<b>Low</b> ⊕⊕○○  <i>Studies of lesser quality or with some uncertainty</i>	NUMBER OF STUDIES	QUALITY OF STUDIES*	CONSISTENCY OF RESULTS*
	1 or more	3a	Yes
	2 or more	3a and/or 3b	Yes
	5 or more	3b and 4a	Yes
<i>Either</i> <ul style="list-style-type: none"> <li>• <b>multiple</b> studies, unless large effect and very clinically important</li> <li>• <b>clinically important and consistent</b> results with minor exceptions at most</li> <li>• <b>free of any significant doubts about validity</b> (low risk of bias, generalizability, design flaws)</li> <li>• <b>adequate statistical power</b> (including studies showing no difference)</li> <li>• <b>some uncertainty</b> due to either               <ul style="list-style-type: none"> <li>• <b>validity</b> threats (generalizability, bias, design flaws or adequacy of statistical power) or</li> <li>• <b>inconsistency</b></li> </ul> </li> <li>• benefit is greater than any risk of harm</li> <li>• patient's values and preferences are supported or considered</li> </ul>			
<i>Or</i> <ul style="list-style-type: none"> <li>• <b>multiple</b> studies</li> <li>• <b>weaker designs</b> for answering the question addressed</li> <li>• <b>consistent</b> results with minor exceptions at most</li> </ul>			
<b>Confirmation</b>	Further research is likely to have an important impact on our confidence in the precision of the answer to the clinical question, and may even change the answer itself.		
<b>Very Low</b> ⊕○○○  <i>Studies with insufficient quality including descriptive studies, case series, general reviews, Insufficient design or execution, too few studies, inconsistent results</i>	NUMBER OF STUDIES	QUALITY OF STUDIES*	CONSISTENCY OF RESULTS*
	1 or more	4a and/or 4b	Yes
		Insufficient quality to meet Low criteria above	
	Published non-research articles	5a and/or 5b	Yes
<ul style="list-style-type: none"> <li>• <b>uncertainty</b> due to either               <ul style="list-style-type: none"> <li>• <b>validity</b> threats (generalizability, bias, design flaws or adequacy of statistical power) or</li> <li>• <b>inconsistency</b></li> </ul> </li> <li>• <b>health professional opinion</b> is the only relevant published information</li> <li>• published studies give <b>inconsistent</b> results or are <b>seriously flawed</b></li> </ul>			
<b>Confirmation</b>	There is published and/or local consensus, but little or no research, to answer the clinical question. Further research is very likely to have an important impact on the answer.		
<b>Grade Not Assignable (GNA)</b>  <i>Local Consensus</i>	NUMBER OF STUDIES	QUALITY OF STUDIES*	CONSISTENCY OF RESULTS*
	0 or more	Any evidence level	No
	Local Consensus	5	No
	<ul style="list-style-type: none"> <li>• studies have not been performed or published AND</li> <li>• <b>local consensus</b> has been established</li> </ul>		
<b>Confirmation</b>	There is insufficient evidence to answer the clinical question.		

**\*Note: When there is both high and low quality evidence and the results are inconsistent:**

- Disregard lower quality evidence if the lower quality evidence is inconsistent with all higher quality evidence.
- Avoid disregarding lower quality evidence when inconsistency is at multiple quality levels, because bias could be introduced when determining which evidence to disregard.

Some of the concepts for this development are based on: **Atkins et al:** Grading quality of evidence and strength of recommendations. *BMJ*, 328(7454): 1490, 2004;

**Briss et al:** Developing an evidence-based Guide to Community Preventive Services--methods. The Task Force on Community Preventive Services. *Am J Prev Med*, 18(1 Suppl): 35-43, 2000; & **Greer et al:** A practical approach to evidence grading. *Jt Comm J Qual Improv*, 26(12): 700-12, 2000.