PLEASE NOTE: These levels are intended to be used alongside the supporting document outlining their use. Using Levels of Evidence does not preclude the need for careful reading, critical appraisal and clinical reasoning when applying evidence.

LEVELS OF EVIDENCE FOR EFFECTIVENESS

Level 1 – Experimental Designs

Level 1.a – Systematic review of Randomized Controlled Trials (RCTs)

Level 1.b – Systematic review of RCTs and other study designs

Level 1.c – RCT

Level 1.d – Pseudo-RCTs

Level 2 – Quasi-experimental Designs

Level 2.a – Systematic review of quasi-experimental studies

Level 2.b – Systematic review of quasi-experimental and other lower study designs

Level 2.c – Quasi-experimental prospectively controlled study

Level 2.d – Pre-test – post-test or historic/retrospective control group study
Level 3 – Observational – Analytic Designs

Level 3.a – Systematic review of comparable cohort studies

Level 3.b – Systematic review of comparable cohort and other lower study designs Level 3.c –

Cohort study with control group

Level 3.d – Case – controlled study

Level 3.e – Observational study without a control group

Level4–Observational–DescriptiveStudies Level4.a

– Systematic review of descriptive studies Level 4.b –

Cross-sectional study

Level 4.c – Case series

Level 4.d – Case study

Level 5 – Expert Opinion and Bench Research Level

5.a – Systematic review of expert opinion Level 5.b

– Expert consensus

Level 5.c – Bench research/ single expert opinion
LEVELS OF EVIDENCE FOR DIAGNOSIS

Level 1 – Studies of Test Accuracy among consecutive patients

Level 1.a – Systematic review of studies of test accuracy among consecutive patients

Level 1.b – Study of test accuracy among consecutive patients

Level 2 – Studies of Test Accuracy among non-consecutive patients

Level 2.a – Systematic review of studies of test accuracy among non-consecutive patients

Level 2.b – Study of test accuracy among non-consecutive patients

Level 3 – Diagnostic Case control studies

Level 3.a – Systematic review of diagnostic case control studies

Level 3.b – Diagnostic case-control study

Level 4 – Diagnostic yield studies

Level 4.a – Systematic review of diagnostic yield studies

Level 4.b – Individual diagnostic yield study

Level 5 – Expert Opinion and Bench Research

Level 5.a – Systematic review of expert opinion

Level 5.b – Expert consensus

Level 5.c – Bench research/ single expert opinion
LEVELS OF EVIDENCE FOR PROGNOSIS

**Level 1 – Inception Cohort Studies**

Level 1.a – Systematic review of inception cohort studies

Level 1.b – Inception cohort study

**Level 2 – Studies of All or None**

Level 2.a – Systematic review of all or none studies

Level 2.b – All or none studies

**Level 3 – Cohort Studies**

Level 3.a – Systematic review of cohort studies (or control arm of RCT) Level 3.b – Cohort study (or control arm of RCT)

**Level 4 – Case series/Case Controlled/ Historically Controlled studies**

Level 4.a – Systematic review of Case series/Case Controlled/Historically Controlled studies Level 4.b – Individual Case series/Case Controlled/Historically Controlled study

**Level 5 – Expert Opinion and Bench Research**

Level 5.a – Systematic review of expert opinion Level 5.b – Expert consensus Level 5.c – Bench research/ single expert opinion
LEVELS OF EVIDENCE FOR ECONOMIC EVALUATIONS

Levels

1. Decision model with assumptions and variables informed by systematic review and tailored to fit the decision making context.
2. Systematic review of economic evaluations conducted in a setting similar to the decision makers.
3. Synthesis/review of economic evaluations undertaken in a setting similar to that in which the decision is to be made and which are of high quality (comprehensive and credible measurement of costs and health outcomes, sufficient time period covered, discounting, and sensitivity testing).
4. Economic evaluation of high quality (comprehensive and credible measurement of costs and health outcomes, sufficient time period covered, discounting and sensitivity testing) and conducted in setting similar to the decision making context.
5. Synthesis / review of economic evaluations of moderate and/or poor quality (insufficient coverage of costs and health effects, no discounting, no sensitivity testing, time period covered insufficient).
6. Single economic evaluation of moderate or poor quality (see directly above level 5 description of studies).
7. Expert opinion on incremental cost effectiveness of intervention and comparator.

LEVELS OF EVIDENCE FOR MEANINGFULNESS

1. Qualitative or mixed-methods systematic review
2. Qualitative or mixed-methods synthesis
3. Single qualitative study
4. Systematic review of expert opinion
5. Expert opinion