

Box 1.3

Rating System for the Hierarchy of Evidence for Intervention/Treatment Questions

- Level I: Evidence from a systematic review or meta-analysis of all relevant RCTs
- Level II: Evidence obtained from well-designed RCTs
- Level III: Evidence obtained from well-designed controlled trials without randomization
- Level IV: Evidence from well-designed case-control and cohort studies
- Level V: Evidence from systematic reviews of descriptive and qualitative studies
- Level VI: Evidence from single descriptive or qualitative studies
- Level VII: Evidence from the opinion of authorities and/or reports of expert committees

Modified from Guyatt, G., & Rennie, D. (2002). *Users' guides to the medical literature*. Chicago, IL: American Medical Association; Harris, R. P., Helfand, M., Woolf, S. H., Lohr, K. N., Mulrow, C. D., Teutsch, S. M., & Atkins, D. (2001). Current methods of the U.S. Preventive Services Task Force: A review of the process. *American Journal of Preventive Medicine*, 20, 21-35.

The search for best evidence should first begin by considering the elements of the PICOT question. Each of the **keywords** from the PICOT question should be used to begin the search. The type of study that would provide the best answer to an intervention or treatment question would be systematic reviews or meta-analyses, which are regarded as the strongest level of evidence on which to base treatment decisions (Guyatt & Rennie, 2002). There are different levels of evidence for each kind of PICOT question (see Chapter 2 for more in-depth discussion). Although there are many hierarchies of evidence available in the literature to answer intervention PICOT questions (e.g., Guyatt & Rennie, 2002; Harris et al., 2001), we have chosen to present a hierarchy of evidence to address these questions that encompasses a broad range of evidence, including systematic reviews of qualitative evidence, also referred to as meta-syntheses (Box 1.3).

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