Can clinical prediction tools predict the need for computed tomography in blunt abdominal? A systematic review.
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Appendix 1: Electronic Search Strategy

With the assistance of Preeti Puligari (Librarian, Heart of England NHS Trust), a comprehensive literature search was run Medline, Embase, The Cochrane Library and NHS Evidence up to August 2014. The following search strategy was used:

((clinical prediction rules/ OR clinical predictors/ OR decision support techniques).ti,ab) AND ((computed tomography/ OR computed tomography scan*/ OR CT scan*/ OR tomography, x-ray computed/).ti,ab) AND ((blunt abdominal trauma/ OR blunt abdominal injur*/ OR intra abdominal injur*/ OR abdominal injuries/ra/ OR wounds, nonpenetrating/ra/ OR thoracic injuries/ra/ OR exp thorax/ra).ti,ab)
Appendix 2: Methodological Quality Assessment Tool

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Rule Evaluation (please circle yes or no):
1. Was the data collected prospectively? Yes/No
2. Was the study setting well described? Yes/No
   (country, type of hospital, number of admissions per year etc)
3. Are the inclusion and exclusion criteria well described? Yes/No
   (is it clear which patients are included?)
4. Are the predictor variables well described? Yes/No
   (clear definitions, reference values etc)
5. Was analysis of the predictor variables blinded? Yes/No
6. Are the outcomes well described? Yes/No
   (are the outcome measures clearly defined?)
7. Was analysis of the outcomes blinded? Yes/No
8. Are the predictor variables reproducible? Yes/No
   (was a statistical test of reliability performed (eg kappa)?)
9. Was adequate follow up provided? Yes/No
10. Was the rule applied to all patients at risk (not just those with CT)? Yes/No
    (were all patients presenting with blunt trauma included?)
11. Was sample size adequate? Yes/No
    (outcomes/predictors > 10)
12. Is the CPR clinically sensible? Yes/No
13. Is the CPR easy to use at the bedside? Yes/No
14. Were the results adequately reported? Yes/No
    (Sensitivity, Specificity, PPV, NPV)

Total Score ___/14