

PURPOSE AND PROCEDURE

The general purpose of *Evidence-Based Nursing* is to select from the health related literature those articles reporting studies and reviews that warrant immediate attention by nurses attempting to keep pace with important advances in their profession. These articles are summarised in "value added" abstracts and commented on by clinical experts. The specific purposes of *Evidence-Based Nursing* are:

- To identify, using predefined criteria, the best quantitative and qualitative original and review articles on the meaning, cause, course, diagnosis, prevention, treatment, or economics of health problems managed by nurses and on quality assurance and continuing professional development
- To summarise this literature in the form of "structured abstracts" that describe the objectives, methods, results, and evidence-based conclusions of studies in a reproducible and accurate fashion
- To provide brief, highly expert comment on the context of each article, its methods, and clinical applications that its findings warrant
- To disseminate the summaries in a timely fashion to nurses.

The Royal College of Nursing (RCN) Publishing Company and the BMJ Publishing Group publish *Evidence-Based Nursing* under the editorship of Dr Alba DiCenso and Dr Donna Ciliska at McMaster University in Canada and Dr Nicky Cullum at the University of York in the UK. The Health Information Research Unit (HIRU) of the Department of Clinical Epidemiology and Biostatistics at McMaster University hosts the editorial office for the production of the abstracts and commissioning of commentaries. Dr Brian Haynes acts as coordinating editor to ensure that methods and procedures are consistent with other evidence-based journals prepared by HIRU.

Criteria for selection and review of articles for abstracting

All articles in a journal issue are considered for abstracting if they meet these criteria:

BASIC CRITERIA

- Original or review articles
- In English
- Quantitative or qualitative studies
- About individuals of all age groups
- About topics that are important to the clinical practice of nurses in all settings.

QUANTITATIVE STUDIES

Studies of prevention or treatment must meet these additional criteria:

- Use of most rigorous study design to appropriately address the question
- Follow up (end point assessment) of at least 80% of those entering the investigation
- Outcome measure of known or probable clinical importance
- Analysis consistent with study design.

Studies of diagnosis must meet these additional criteria:

- Clearly identified comparison groups, at least one of which is free of the disorder or condition

- Interpretation of diagnostic standard without knowledge of test result
- Interpretation of test without knowledge of diagnostic standard result
- Objective diagnostic (gold) standard (eg, central venous pressure) or current clinical standard for diagnosis (eg, sphygmomanometer reading for hypertension), preferably with documentation of reproducible criteria for subjectively interpreted diagnostic standard (ie, report of statistically significant measure of agreement among observers)
- Analysis consistent with study design.

Studies of prognosis must meet these additional criteria:

- All study participants initially free of the outcome of interest
- Follow up of at least 80% of participants until the occurrence of a major study end point or to the end of the study
- Analysis consistent with study design.

Studies of causation must meet these additional criteria:

- Clearly identified comparison group for those at risk of, or having, the outcome of interest (ie, randomised, quasi randomised, or non-randomised controlled trial; cohort analytic study with case by case matching or statistical adjustment to create comparable groups; case control study)
- Blinding of observers of outcome to exposure (criterion assumed to be met if outcome is objective, eg, all cause mortality, self administered psychometric test)
- Blinding of observers of exposure to outcomes for case control studies or blinding of subjects to exposure for all other study designs
- Analysis consistent with study design.

Studies of quality assurance and continuing education must meet these additional criteria:

- Use of most rigorous study design to appropriately address question
- Follow up of at least 80% of participants
- Outcome measure of known or probable clinical or educational importance
- Analysis consistent with study design.

Studies of the economics of healthcare programmes or interventions must meet these additional criteria:

- The economic question must compare alternative courses of action
- Alternative diagnostic or therapeutic services or quality assurance activities must be compared on the basis of both the outcomes produced (effectiveness) and resources consumed (costs)
- Evidence of effectiveness must be from a study (or studies) that meets the criteria for treatment, diagnosis, quality assurance, or a review article
- Results should be presented in terms of the incremental or additional costs and outcomes of one intervention over another
- Where there is uncertainty in the estimates or imprecision in the measurement, a sensitivity analysis should be done.

Clinical prediction guides must meet these additional criteria:

The guide must be generated in 1 set of patients (training set) and validated in an independent set of patients (test set) and must also meet the above noted criteria for treatment, diagnosis, prognosis, or causation.

Review articles must meet these additional criteria:

- A clear statement of the clinical topic being reviewed
- A clear description of the sources and methods for identifying articles
- Specification of the inclusion and exclusion criteria for selecting articles for detailed review
- At least 1 article in the review must meet the above noted criteria for treatment, diagnosis, prognosis, causation, quality improvement, or economics of health care programmes.

QUALITATIVE STUDIES

- Research topic or question specified
- Appropriate research design to address question
- Research method described and substantiated
- Study participants and context described

- Information gathering and analysis appropriate
- Data interpretation and conclusions consistent with data analysis.

These criteria are subject to modification if, for example, it is found feasible to apply higher standards that increase the validity and applicability of studies for clinical practice. The objective of *Evidence-Based Nursing* is to abstract only the very best literature, consistent with a reasonable number of articles "making it through the filter".

Articles meeting the criteria set out above are abstracted according to the procedure for more informative abstracts,¹ with these modifications: abstracts can be up to 425 words in length; and each abstract is reviewed by an expert in the content area covered by the article. This expert writes a commentary in which she or he compares the study findings to previous research findings, identifies any important methodological problems that affect interpretation of the study results, and offers recommendations for clinical application. The author of the article is given an opportunity to review the abstract and commentary before publication.

1 Haynes RB, Mulrow CD, Huth EJ, *et al.* More informative abstracts revisited. *Ann Intern Med* 1990;113:69-76.

Journals currently reviewed

Acta Obstet Gynecol Scand	Br J Obstet Gynaecol	J Adv Nurs	Lancet
Acta Psychiatr Scand	Br J Psychiatry	J Affect Disord	Med Care
Age Ageing	Br J Rheumatol	J Am Acad Child Adolesc Psychiatry	Med J Aust
Am J Cardiol	Br J Surg	J Am Board Fam Pract	Midwifery
Am J Crit Care	Can J Nurs Adm	J Am Coll Cardiol	N Engl J Med
Am J Epidemiol	Can J Nurs Res	J Am Coll Surg	Neonatal Netw
Am J Gastroenterol	Can J Psychiatry	J Am Geriatr Soc	Neurology
Am J Health Promot	Can J Public Health	J Am Med Informatic Assoc	NT Research
Am J Infect Control	Can Med Assoc J	J Burn Care Rehabil	Nurs Res
Am J Med	Cancer Nurs	J Child Psychol Psychiatry	Nurs Times
Am J Obstet Gynecol	Cardiovasc Nurs	J Clin Epidemiol	Obstet Gynecol
Am J Psychiatry	Chest	J Clin Exp Neuropsychol	Pain
Am J Public Health	Circulation	J Clin Psychiatry	Patient Educ Couns
Am J Respir Crit Care Med	Clin Invest Med	J Clin Psychopharmacol	Pediatrics
Am J Surg	Clin Nurs Res	J Community Health Nurs	Perspect Psychiatr Care
Am Psychol	Clin Pediatr	J Consult Clin Psychol	Prog Cardiovasc Nurs
Anaesthesia	Clin Psychology	J Epidemiol Community Health	Psychiatry
Ann Emerg Med	Cochrane Library	J Fam Pract	Interpersonal and
Ann Intern Med	Cognitive Therapy and Research	J Family Nursing	Biological Processes
Ann Med	Crit Care Med	J Gen Intern Med	Psychol Aging
Ann Surg	Diabet Med	J Infect Dis	Psychol Bull
ANNA J	Diabetes Care	J Intern Med	Psychol Med
ANS Adv Nurs Sci	Diabetes Educ	J Nerv Ment Dis	Psychological
AORN J	Dimen Crit Care Nurs	J Neurol Neurosurg Psychiatry	Assessment
Appl Nurs Res	Fam Plann Perspect	J Neuropsychiatry Clin Neurosci	Psychopharmacol Bull
Arch Dis Child	Fertil Steril	J Neurosci Nurs	Psychosom Med
Arch Fam Med	Gastroenterol Nurs	J Nurs Staff Dev	Public Health Nurs
Arch Gen Psychiatry	Gastroenterology	J Nurse Midwifery	Qual Health Care
Arch Intern Med	Gut	J Pain Symptom Manage	Qual Health Res
Arch Neurol	Health Educ Behav	J Pediatr	Res Nurs Health
Arch Pediatr Adolesc Med	Health Psychol	J Pediatr Nurs	Schizophr Bull
Arch Surg	Heart	J Pediatr Oncol Nurs	Schizophr Res
Arthritis Rheum	Heart Lung	J Perianesth Nurs	Sociol Health Illn
Aust J Adv Nurs	Hypertension	J Vasc Nurs	Spine
Behav Res Ther	Image J Nurs Sch	J Vasc Surg	Stroke
Birth	Int J Eat Disord	J Wound Ostomy	Surgery
BMJ	Int J Geriatr Psychiatry	Continence Nurs	Thorax
Br J Clin Psychol	JAMA	Journal of Counseling Psychology	West J Nurs Res
Br J Gen Pract	J Abnorm Psychol		