

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 described, critiqued and commented on by nurses and other health professionals. 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, assessment, prevention, treatment, or economics of health problems managed by nurses and on quality improvement
- to provide a description and expert commentary on the context of each article, its methods and the clinical applications that its findings warrant
- to disseminate the summaries in a timely fashion to nurses

The RCN Publishing Company Limited and the BMJ Publishing Group publish *Evidence-Based Nursing*. A new editorial board is currently being assembled; articles for the first two issues of 2010 are being chosen by the content editors, Bazian Ltd, using the selection criteria defined below.

Criteria for selection and review of articles for abstracting

All articles in a journal issue are considered for inclusion if, based on their abstracts, they meet the following basic and category-specific criteria:

Basic criteria

- original or review articles
- in English
- quantitative and qualitative studies
- about topics that are important to the clinical practice of nurses in any setting
- analysis of data consistent with the study question

Category-specific criteria (quantitative studies)

Studies of prevention or treatment must also include:

- random allocation of participants to comparison groups
- outcome measures of known or probable clinical importance

Studies of assessment (screening or diagnosis) must also include:

- a spectrum of participants, some (but not all) of whom have the condition of interest
- an 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 beyond chance among observers)

Studies of prognosis must also include:

- an inception cohort (first onset or assembled at a uniform point in the development of a condition or disease) of individuals, all initially free of the outcome of interest

Studies of causation must also include:

- observations of the relation between modifiable exposures and putative clinical outcomes
- prospective data collection with clearly identified comparison group(s) for those at risk of, or having, the outcome of interest (ie, randomised controlled trials, quasi-randomised controlled trials, non-randomised controlled trials, cohort studies with case by case matching or statistical adjustment to create comparable groups, or nested case-control studies)

Studies of quality improvement or continuing education must also include:

- random allocation of participants or units to comparison groups
- outcome measures of known or probable clinical importance

Studies of the economics of healthcare interventions must include:

- an economic question comparing alternative courses of action
- comparison of alternative diagnostic or therapeutic services or quality improvement activities on the basis of both the outcomes produced (effectiveness) and resources consumed (costs)
- evidence of effectiveness from a study (or studies) of real (not hypothetical) patients, which meet(s) the criteria for treatment, assessment, quality improvement, or a systematic review article
- results presented in terms of the incremental or additional costs and outcomes of one intervention over another

Clinical prediction guides must also include:

- generation of the guide in ≥ 1 set of patients (training or derivation set)
- validation of the guide in an independent set of patients (test or validation set)

Systematic review articles must also include:

- 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
- ≥ 1 article in the review that meets the above noted criteria for treatment, assessment, prognosis, causation, quality improvement, economics, or clinical prediction guides

Qualitative studies

- content reflects the phenomenon of interest from the perspective of people experiencing it
- data collection methods are appropriate for qualitative data
- analyses are appropriate for qualitative data

These criteria are subject to modification if, for example, it becomes 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 and chosen for coverage in *Evidence-Based Nursing* are described and reviewed by an expert in the content area covered by the article. This expert writes a commentary in which she or he describes the article and 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.

* Journals currently reviewed

For the first two issues of 2010 the journals being covered are those of the Core Nursing and Core Clinical (Abridged Index Medicus) Journal collections in PubMed Medline. Searches were carried out in the Core collections using the following search strategy:

- 1 diagnos* OR prevalence OR etiology OR aetiology OR random* OR meta-analysis OR Systematic review OR (Systematic AND review)
- 2 cochrane [journal name]
- 3 1 OR 2

Table of Contents screening for select key nursing journals will be re-introduced for the third issue of 2010.