

Diagnosis

1. Is this evidence about diagnosis valid?
 - a. Was there an independent, blind comparison with a reference (“gold”) standard of diagnosis?
 - b. Was the diagnostic test evaluated in an appropriate spectrum of patients (like those in whom it would be used in practice)?
 - c. Was the reference standard applied regardless of the diagnostic test results?
 - d. Was the cluster of tests validated in a second, independent group of patients?

2. Is this valid evidence about diagnosis important?

		Target Disorder		Totals
		Present	Absent	
Diagnostic Test Result	Positive	a	b	a+b
	Negative	c	d	c+d
Totals		a+c	b+d	a+b+c+d

- a. Sensitivity = $a/(a+c)$
 - b. Specificity = $d/(d+c)$
 - c. LR+ = sensitivity/(1-specificity)
 - d. LR- = (1-sensitivity)/specificity
 - e. PPV = $a/(a+b)$
 - f. NPV = $d/(c+d)$
 - g. Prevalence = $(a+c)/(a+b+c+d)$
 - h. Study Pre-test odds = prevalence/(1-prevalence)
 - i. Post-test odds = pre-test odds * LR
 - j. Post-test probability = post-test odds/(post-test odds + 1)
3. Can we apply this valid, important evidence about a diagnostic test in caring for our patient?

- a. Is the diagnostic test available, affordable, accurate, and precise in our setting?
- b. Can we generate a clinically sensible estimate of our patient's pre-test probability?
 - i. From personal experience, prevalence statistics, practice databases, or primary studies?
 - ii. Are the study patients similar to our own?
 - iii. Is it unlikely that the disease possibilities or probabilities have changed since this evidence was gathered?
- c. Will the resulting post-test probabilities affect our management and help our patient?
 - i. Could it move us across a test-treatment threshold?
 - ii. Would our patient be a willing partner in carrying it out?
 - iii. Would the consequences of the test help our patient reach his or her goals in all this?

Pre-Test Probability:

- 1. Is this evidence about pre-test probability valid?
 - a. Did the study patients represent the full spectrum of those who present with this clinical problem?
 - b. Were the criteria for each final diagnosis explicit and credible?
 - c. Was the diagnostic work-up comprehensive and consistently applied?
 - d. For initially undiagnosed patients, was follow-up sufficiently long and complete?
- 2. Is this valid evidence about pre-test probability important?
 - a. What were the diagnoses and their probabilities?
 - b. How precise were these estimates of disease probability?

Screening and Case Finding

1. Guides for deciding whether a screening or case-finding maneuver does more good than harm
 - a. Is there RCT evidence that early diagnosis really leads to improved survival, quality of life, or both?
 - b. Are the early-diagnosed patients willing partners in the treatment strategy?
 - c. How do benefits and harms compare in different people and with different screening strategies?
 - d. Do the frequency and severity of the target disorder warrant the degree of effort and expenditure?