

The Hierarchy of Evidence

The Hierarchy of evidence is based on summaries from the National Health and Medical Research Council (2009), the Oxford Centre for Evidence-based Medicine Levels of Evidence (2011) and Melynyk and Fineout-Overholt (2011).

I Evidence obtained from a systematic review of all relevant randomised control trials.

II Evidence obtained from at least one well designed randomised control trial.

III Evidence obtained from well-designed controlled trials without randomisation.

IV Evidence obtained from well-designed cohort studies, case control studies, interrupted time series with a control group, historically controlled studies, interrupted time series without a control group or with case- series

V Evidence obtained from systematic reviews of descriptive and qualitative studies

VI Evidence obtained from single descriptive and qualitative studies

VII Expert opinion from clinicians, authorities and/or reports of expert committees or based on physiology

| Reference (include title, author, journal title, year of publication, volume and issue, pages) | Evidence level (I-VII) | Key findings, outcomes or recommendations |
|---|------------------------|---|
| <p>Fierson, W. M. (2018, December). Screening Examination of Premature Infants for Retinopathy of Prematurity. <i>American Academy of Pediatrics</i>, 142(6). doi:https://doi.org/10.1542/peds.2018-3061</p> | I | <p>Statement revises a previous statement on screening of preterm infants for retinopathy of prematurity (ROP) that was published in 2013</p> <p>Early treatment for ROP randomised trial confirmed the efficacy of treatment of high risk pre threshold ROP and redefined indications for treatment</p> <p>New recommendations for timing of first eye examination based on gestational age at birth</p> |
| <p>Susan Carden – Consultant Ophthalmologist – The Royal Children’s Hospital</p> | VII | <p>Expert opinion on the process of neonatal eye examinations on the Butterfly Ward at the Royal Children’s Hospital.</p> |