|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Author, Year** | **Randomization adequate?** | | **Allocation concealment adequate?** | | **Groups similar at baseline?** | **Maintain comparable groups?** | **Eligibility criteria specified?** | **Outcome assessors masked?** | **Care provider masked?** | **Patient masked?** |
| MacMillian et al, 200987 | Yes | | NR | | Yes | Yes | Yes | Yes | No | Unclear |
| **Reporting of attrition, crossovers, adherence, and contamination?** | **Loss to followup differential or high** | **Intention-to-treat analysis** | **Post-randomization exclusions** | | **Outcomes prespecified** | **Funding source** | **External validity** | | **Quality rating** |
| Yes, no, yes, no | Yes, high 43% (148/347) of screened; 41% (148/360) nonscreened | Yes | No | | Yes | Ontario Women’s Health Council/Echo | Possible limitations: Canadian setting offers universal health care and followup care services; site conditions carefully controlled; no specific IPV intervention was provided. | | Fair (high loss to followup) |