APPENDIX 4: DATA ABSTRACTION FORM — CLINICAL EFFECTIVENESS, HARMS, DIAGNOSTIC TEST ACCURACY

DATA ABSTRACTION FORM:		
Clinical Effectiveness (Q1), Frequen	cy of Harms (Q2), DTA (Q	5)
Reviewer		
RefID		
Author, date		
Study Characteristics		
Country setting		
Care setting		
Study design		
Study duration		
Inclusion and exclusion criteria		
Description of study population (e.g., HCV high-risk group)		
Q1 (clinical effectiveness), Q2 (harms): description of intervention; Q5 (DTA): description of index test		
Q1 (clinical effectiveness), Q2 (harms): description of comparator; Q5 (DTA): description of reference standard		
Q5 (DTA): timing of or interval between index test and reference standard administration		
Conflicts of interest (yes, no, none declared, not mentioned)		
Funding status		
Other		
Patient Characteristics		
	Intervention	Comparator
Number enrolled		
Number completing study		
Age (mean, SD)		
Female, n (%)		
Male, n (%)		
Other		
Clinical Effectiveness Outcomes (Q1)		•
	Intervention	Comparator
 Long-term outcomes: Mortality due to HCV infection Morbidity due to HCV infection Compensated cirrhosis 		

DATA ABSTRACTION FORM: Clinical Effectiveness (Q1), Frequency of Harms (Q2), DTA (Q5)				
 Decompensated cirrhosis Hepatocellular carcinoma Rate of liver transplantation Quality of life 				
 Intermediate outcomes: HCV transmission Virologic response rates (RVR, eRVR, EVR, SVR12, SVR24) Behavioural changes to improve health outcomes Histological improvements 				
Comments Frequency of Harms Outcomes (Q2)				
	Intervention	Comparator		
 Overdiagnosis Overtreatment False positives False negatives Harms of follow-up tests (including biopsy) Effect on insurance premiums Labelling Abuse or violence Anxiety Partner discord Comments 				
	Index Test	Reference Standard		
 Sensitivity Specificity Positive predictive value Negative predictive value Positive likelihood ratio Negative likelihood ratio Diagnostic odds ratio AUC Detection rate 				

DATA ABSTRACTION FORM: Clinical Effectiveness (Q1), Frequency of Harms (Q2), DTA (Q5)				
Number needed to screen to detect 1 case				
Comments				

AUC = area under the receiver-operating characteristic curve; DTA = diagnostic test accuracy; eRVR = extended rapid virologic response; EVR = early virologic response; HCV = hepatitis C virus; n = number; PCR = polymerase chain reaction; RVR = rapid virologic response; SD = standard deviation; SVR12 = sustained virologic response at 12 weeks after treatment; SVR24 = sustained virologic response at 24 weeks after treatment.