

Journal of Pediatric Surgery

Levels of Evidence: Although this will be reviewed by our Editorial Staff, and their opinion will be final, the *Journal* asks authors to assign a Level of Evidence to all **clinically oriented** manuscripts. The following table is offered to assist authors:

Type of Study	Treatment Study	Prognosis Study	Study of Diagnostic Test	Cost Effectiveness Study
LEVEL I	Randomized controlled trials with adequate statistical power to detect differences (narrow confidence intervals) and follow-up >80%	High-quality prospective cohort study with >80% follow-up, and all patients enrolled at same time point in disease	Testing previously developed diagnostic criteria in a consecutive series of patients and a universally applied "gold" standard	Reasonable costs and alternatives used in study with values obtained from many studies, study used multi-way sensitivity analyses
LEVEL II	Lower-quality randomized trials (follow-up <80%, improper randomization techniques, no masking) Prospective comparative study	Lower-quality prospective cohort study (<80% follow-up, patients enrolled at different time points in disease) Retrospective study Untreated controls from a randomized controlled trial	Development of diagnostic criteria in a consecutive series of patients and a universally applied "gold" standard	Reasonable costs and alternatives used in study with values obtained from limited studies, study uses multi-way sensitivity analyses
LEVEL III	Case-control study Retrospective comparative study	Case-control study	Study of nonconsecutive patients and/or without a universally applied "gold" standard	Analyses based on a limited section of alternatives and costs, or poor estimates of costs
LEVEL IV	Case series with no comparison group	Case series with no comparison group	Use of a poor reference standard Case control study	No sensitivity analysis
LEVEL V	Expert opinion	Expert opinion	Expert opinion	Expert opinion