**Quality assessment**

**QualSyst (Standard Quality Assessment Criteria For Evaluating Primary Research Papers)**

**Checklist for assessing the quality of quantitative studies**

Researcher performing quality assessment: Anna

Date: 08.07.2020

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| Author  Macht |
| Year  2000 |
| Wirkungen von Entspannung und Musik auf Befinden und  Motorik von Parkinson-Patienten |
| Full score: 14/26 |

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| **Criteria** | | **Yes (2)** | **Partial (1)** | **No (0)** | **NA** |
| **1** | Question / objective sufficiently described? | **x** |  |  |  |
| **2** | Study design evident and appropriate? | **x** |  |  |  |
| **3** | Method of subject/comparison group selection *or* source of information/input variables described and appropriate? |  |  | **x** |  |
| **4** | Subject (and comparison group, if applicable) characteristics sufficiently described? |  | **x** |  |  |
| **5** | If interventional and random allocation was possible, was it described? |  | **x** |  |  |
| **6** | If interventional and blinding of investigators was possible, was it reported? |  |  | **x** |  |
| **7** | If interventional and blinding of subjects was possible, was it reported? |  |  |  | **x** |
| **8** | Outcome and (if applicable) exposure measure(s) well defined and robust to measurement / misclassification bias?  Means of assessment reported? | **x** |  |  |  |
| **9** | Sample size appropriate? |  | **x** |  |  |
| **10** | Analytic methods described/justified and appropriate? |  | **x** |  |  |
| **11** | Some estimate of variance is reported for the main results? |  |  | **x** |  |
| **12** | Controlled for confounding? |  | **x** |  |  |
| **13** | Results reported in sufficient detail? | **x** |  |  |  |
| **14** | Conclusions supported by the results? |  | **x** |  |  |

Kmet L, Lee R, Cook L. Standard Quality Assessment Criteria for Evaluating Primary Research Papers from a Variety of Fields. Alberta Heritage Foundation for Medical Research; 2004. 31 p.

Researcher performing quality assessment: Anna

Date: 16.10.2019

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| Author  Potu et al |
| Year  2018 |
| Article Title  PALLIATIVE CARE CONSULTATION REDUCES 30-DAY READMISSION RATES FOR HOSPITALIZED PATIENTS WITH HEART FAILURE: A SINGLE-CENTER EXPERIENCE |

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| **6** | If interventional and blinding of investigators was possible, was it reported? |  |  |  | **x** |
| **7** | If interventional and blinding of subjects was possible, was it reported? |  |  |  | **x** |
| **8** | Outcome and (if applicable) exposure measure(s) well defined and robust to measurement / misclassification bias?  Means of assessment reported? |  | **x** |  |  |
| **9** | Sample size appropriate? | **x** |  |  |  |
| **10** | Analytic methods described/justified and appropriate? | **x** |  |  |  |
| **11** | Some estimate of variance is reported for the main results? |  |  | **x** |  |
| **12** | Controlled for confounding? | **x** |  |  |  |
| **13** | Results reported in sufficient detail? |  | **x** |  |  |
| **14** | Conclusions supported by the results? | **x** |  |  |  |

Kmet L, Lee R, Cook L. Standard Quality Assessment Criteria for Evaluating Primary Research Papers from a Variety of Fields. Alberta Heritage Foundation for Medical Research; 2004. 31 p.

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| Author  Di Giulio |
| Year  2013 |
| Article Title  Should patients perception of health status be integrated in the prognostic assessment of heart failure patients?  A prospective study |

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| **10** | Analytic methods described/justified and appropriate? | **x** |  |  |  |
| **11** | Some estimate of variance is reported for the main results? | **x** |  |  |  |
| **12** | Controlled for confounding? | **x** |  |  |  |
| **13** | Results reported in sufficient detail? | **x** |  |  |  |
| **14** | Conclusions supported by the results? | **x** |  |  |  |

Kmet L, Lee R, Cook L. Standard Quality Assessment Criteria for Evaluating Primary Research Papers from a Variety of Fields. Alberta Heritage Foundation for Medical Research; 2004. 31 p.

Researcher performing quality assessment: Anna

Date: 14.11.2019

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| Author  Wong |
| Year  2013 |
| Article Title  Home-Based Advance Care Programme is Effective in Reducing Hospitalisations of Advanced Heart Failure Patients: A Clinical and Healthcare Cost Study |

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| **9** | Sample size appropriate? |  | **x** |  |  |
| **10** | Analytic methods described/justified and appropriate? | **x** |  |  |  |
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| **12** | Controlled for confounding? |  |  | **x** |  |
| **13** | Results reported in sufficient detail? | **x** |  |  |  |
| **14** | Conclusions supported by the results? | **x** |  |  |  |

Researcher performing quality assessment: Anna

Date: 14.11.2019

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| Author  Kheirbek |
| Year  2015 |
| Article Title  Discharge Hospice Referral and Lower 30-Day All-Cause Readmission in Medicare Beneficiaries Hospitalized for Heart Failure |

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| **11** | Some estimate of variance is reported for the main results? | **x** |  |  |  |
| **12** | Controlled for confounding? |  |  | **x** |  |
| **13** | Results reported in sufficient detail? | **x** |  |  |  |
| **14** | Conclusions supported by the results? |  | **x** |  |  |

Researcher performing quality assessment: Anna

Date: 14.11.2019

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| Author  Lycett |
| Year |
| Article Title  Inpatient palliative care consultation for patients with advanced heart failure |

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| **4** | Subject (and comparison group, if applicable) characteristics sufficiently described? |  |  | **x** |  |
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| **7** | If interventional and blinding of subjects was possible, was it reported? |  |  |  | **x** |
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| **13** | Results reported in sufficient detail? |  | **x** |  |  |
| **14** | Conclusions supported by the results? |  | **x** |  |  |