

Appendix 2

Pesticides Literature Review

Data Extraction Form

INSTRUCTIONS TO COMPLETE THIS AUTOMATIC FORM

1. Use the tab button to jump fields
2. Use the mouse or the space bar to check boxes
3. Save the file with the name "First author_year of publication_your initials"
For example: Arbuckle_1998_KB
4. Press F1 and you will see some instructions (not for all fields)

Reviewer name: Choose your name from the list:

Date:

Article:

Health Effect:

INCLUSION VERIFICATION

Does this study meet all the inclusion criteria?
<input type="checkbox"/> It is a study of health effects related to pesticide exposure in human populations
<input type="checkbox"/> This study was published between 1992 – present
<input type="checkbox"/> This paper is peer-reviewed
Conclusion
<input type="checkbox"/> Included <input type="checkbox"/> Excluded
<input type="checkbox"/> Not sure (Please discuss with Marg Sanborn or Kate Bassil before you continue)

METHODS

Study design
<input type="checkbox"/> Retrospective cohort <input type="checkbox"/> Prospective cohort <input type="checkbox"/> Case control <input type="checkbox"/> Case report, case series <input type="checkbox"/> Cross-sectional survey <input type="checkbox"/> Other
Study objective
Geographical region (city, country)
POPULATION
Number of individuals included in the study
Selection Method
<input type="checkbox"/> Random sample <input type="checkbox"/> Other <input type="checkbox"/> Convenience sample
Any matching used? Stratification? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Inclusion criteria
Exclusion criteria
Demographics
Age: Sex: Ethnicity: Employment: Other demographics:

DATA

Description of exposure
Type of exposure: <input type="checkbox"/> Occupational <input type="checkbox"/> Home <input type="checkbox"/> Para-occupational <input type="checkbox"/> Other
Length of exposure:
Timing of exposure:
Other information regarding exposure:
Exposure Assessment Method
<input type="checkbox"/> Self-report/questionnaire <input type="checkbox"/> Lab diagnosis
<input type="checkbox"/> Biological monitoring <input type="checkbox"/> Database
<input type="checkbox"/> Records (work, use, farm receipts, etc.) <input type="checkbox"/> Other test (ex. skin patch)
Other
Quality control (i.e. systematic checks for errors, inconsistencies, rechecking of procedures, etc.)
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Was the exposure assessment method blinded to the outcome?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Outcome Description
Outcome Assessment Method
<input type="checkbox"/> Self-report / questionnaire <input type="checkbox"/> Lab diagnosis
<input type="checkbox"/> Clinical diagnosis / assessment <input type="checkbox"/> Database
<input type="checkbox"/> Clinical records <input type="checkbox"/> Other test (ex. skin patch,)
Other
Quality control?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Was the outcome assessment method blinded to the exposure?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know

Covariates
Description
Quality control?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Adjust for confounding (i.e. stratified analysis, adjustment):
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Method of data analysis, statistical tests
Measures of effect:
Measure of association
Model of association
Other
Power: <input type="checkbox"/> Estimated <input type="checkbox"/> Not estimated

RESULTS

General
Quantitative results (Associate measurements)
Analysis (Limitations indicated by the authors)
Authors Conclusions

METHODOLOGICAL QUALITY ASSESSMENT

Were the methods and questions clearly stated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Were the setting, population, and selection criteria clearly described?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Were the analyses appropriate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Was bias avoided:	
Selection bias?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Ascertainment bias?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Confounding?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Were all selected subjects included in the analysis?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Was the follow-up complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Were there exclusions from the analysis?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Did the researchers control for potential confounders?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
Did the researchers account for any heterogeneity in results?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know

Rank on the Global Assessment Scale

(1-very poor, 2-poor, 3-unsatisfactory, 4-satisfactory, 5-good, 6-very good, 7-excellent):

Conclusions:

Is there any additional information you would like to add?

Is there any additional study in the reference list of this article that might be included in our review? Which reference(s)?

**Please, after completion of this form return it to Kate Bassil by email
(kate.bassil@utoronto.ca)**