

**Table 100: Clinical evidence profile: Comparison 11. Cohort segregation + individual segregation versus usual care**

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Cohort segregation into pathogens	Control	Relative (95% CI)	Absolute		
<b>Patient satisfaction</b>												
1 (Griffiths 2004)	observational studies	serious <sup>1</sup>	no serious inconsistency	no serious indirectness	Not calculable <sup>2</sup>	none	Positive: 63%: Negative: 12%: Unsure: 25% (p<0.001)	-	-	-	VERY LOW	IMPORTANT
<b>Carer satisfaction</b>												

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Cohort segregation into pathogens	Control	Relative (95% CI)	Absolute		
1 (Griffiths 2004)	observational studies	serious <sup>1</sup>	no serious inconsistency	no serious indirectness	Not calculable <sup>2</sup>	none	Positive: 85%: Negative: 4%: Unsure: 11% (p<0.001)	-	-	-	VERY LOW	IMPORTANT

Abbreviations: CI: confidence interval

<sup>1</sup> The quality of the evidence was downgraded by 1 because of high risk of bias in relation to sample selection and outcome reporting

<sup>2</sup> Imprecision cannot be calculated with the data reported