| | tle and Abstract Screening Level I This paper should be Excluded (not back pain, not CAM, not primary study or systematic review, not English, not US/Canada/Europe/Australia/NZ), not adults Included/Not Sure |
|-----|---|
| Tit | le and Abstract Screening Level II |
| | Is this a Systematic Review? (ie lists the sources searched, years, follows SR procedures) □ Not a review - primary study □ Yes - focus on utilization or cost-effectiveness of CAM →exclude □ Yes - focus on effectiveness of CAM →exclude □ Review only - not systematic or not on topic →exclude |
| 2. | Does the study discuss the costs or use/utilization of CAM therapy? (if the study focuses on the <u>effectiveness</u> of the CAM therapy-answer No) ☐ Yes ☐ No (not CAM, not utilization) → exclude ☐ Can't tell → continue |
| 3. | Where was the study conducted? □ US data □ Canada, Europe, Australia, NZ, UK □ Other (Asia, India, Africa, SA) →exclude □ Can't tell |
| 4. | Should it be excluded for other reasons? (eg. not adults, not English) ☐ Yes, specify →exclude |
| Fι | III-text Screening |
| 1. | Should be excluded for the following reasons □ Systematic review →exclude □ Practice guidelines →exclude □ Not adults (18+) →exclude □ No (continue) |
| 2. | Where was the study conducted? |

B-1

 \Box US

□ Can't tell

□ Canada, Europe, UK, NZ, Australia
 □ Other (Asia, India, Africa, SA) →exclude

3. Does the study discuss? (Check all that apply)

 Use/Utilization of CAM Costs associated with CAM therapy □ Views on using CAM therapy (practitioner or patients) \square None of the above \rightarrow exclude **Data Extraction Form – Utilization Papers** 1. Category Practitioner vs practitioner □ Utilization survey □ Specific CAM therapy Specific diseased population □ Specific CAM practitioner Other □ Cost utilization - US □ Non-US costs only 2. Data extraction table prepared by: □ Lina Santaguida Mary Gauld Rachel Morris □ Solina Yoo Other 3. Results of data extraction □ Full data extraction - companions (if applicable) _____ □ Some data extraction - not presented for back pain with CAM □ Companion article to: RefID _____ 4. Additional data for consideration Costs in USD □ Costs in other currencies □ Multivariate analysis Questions or questionnaire available □ Trends (time 1, time 2 etc.) □ Recommendations from paper □ None of the above **Data Extraction Form – Costs Papers** 1. Location of pain □ Low back pain only □ Neck pain only Combination Unspecified

2. Focus of paper

□ Comparison of care providers (specify)

| | | Insurance coverage | |
|----|-----------------|--|--|
| | | Costs per treatment | |
| | | Non-medical costs discussed | |
| 3. | Practitioner | | |
| | | Chiropractor (DC) | |
| | | MD | |
| | | Physical Therapist | |
| | | Naturopathic | |
| | | Massage Therapist | |
| | | Acupuncturist | |
| | | Other (specify) | |
| 4. | Type of Therapy | | |
| | - | Chiropractic | |
| | | Manipulation | |
| | | Massage | |
| | | Acupuncture | |
| | | Medical | |
| | | Surgical | |
| | | Other (specify) | |
| 5. | Insurance | | |
| | | No Insurance (out of pocket expense) | |
| | | Private Insurance | |
| | | Worker's Compensation | |
| | | Medicaid, Medicare, HMO | |
| | | Co-payments | |
| | | Other | |
| 6. | Costs provided | | |
| | | Per episode | |
| | | Per type of treatment | |
| | | Non-medical costs (ie: transportation) | |
| | | Direct costs for service provider (ie: clinical operating costs) | |
| | | No specific costs provided | |