

Evidentiary Table (continued).

Study & Year Published	Class of Evidence	Setting & Study Design	Methods & Outcome Measures	Results	Limitations & Comments
Wardlaw et al ⁴⁶ (2015)	III	Meta-analysis of prospective and retrospective cohort studies	Identified all published studies in which the ABCD2 score was used to predict risk for stroke among patients with suspected TIA or minor stroke; evaluated proportion of recurrent stroke patients at 7 and 90 days with ABCD2 score <4 or ≥4 by bivariate ROC curve random-effects meta-analyses	N=4,443 patients; 29 studies included; 15 prospective, 14 retrospective cohort studies; to reduce the potential impact of study methods on heterogeneity, the authors analyzed the 10 studies that provided data on stroke recurrence at both 7 and 90 days, 5 were retrospective cohort studies; recurrent stroke % (95% CI) 7 days: ABCD2 score ≥4: 5.2% (2.8 to 9.4); ABCD2 score <4: 1.4% (0.7 to 3.1); 90 days: ABCD2 score ≥4: 8.9% (5.3 to 14.5); ABCD2 score <4: 2.4% (1.3 to 4.4); performance ABCD2 score ≥4 7 days: sensitivity 86.7 (95% CI 81.4 to 90.7); specificity 35.4 (95% CI 33.3 to 38.3); negative LR 0.38*; 90 days: sensitivity 85.4 (95% CI 81.1 to 88.9); specificity 36.2 (95% CI 34.0 to 37.6); negative LR* 0.40	Studies included were of varying quality (2 Class II, most Class III), with some included articles being fatally flawed, with ABCD2 scores influencing workup and follow-up decisions; no attempted sensitivity analyses or regression model to account for study differences; no sensitivity analysis based on the higher-quality studies was reported