#### **Guidelines Update to Laparoscopy in the Era of COVID-19**

### **Appendix D: Evidence Tables**

#### **KQ1: Adults**

Author(s):

Question: Nonoperative management compared to operative management for patients with disease processes amenable to either approach and active COVID infection

Setting:

Bibliography: . [Intervention] for [health problem]. Cochrane Database of Systematic Reviews [Year], Issue [Issue].

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			Certainty as	ssessment			№ of patients		Effect			
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	nonoperative management	operative management	Relative (95% CI)	Absolute (95% CI)	Certainty	Importance
Conversion	Conversion to operative management/ Return to OR											
1	observational studies	serious <sup>a</sup>	not serious	not serious	very serious <sup>b,c</sup>	none	7/39 (17.9%)	0/3 (0.0%)	OR 1.62 (0.08 to 34.72)	0 fewer per 1,000 (from 0 fewer to 0 fewer)	⊕⊖⊖⊖ Very low	
Mortality	,											
3	observational studies	serious <sup>a</sup>	not serious	not serious	very serious <sup>b,c</sup>	none	0/13 (0.0%)	1/22 (4.5%)	OR 0.02 (0.00 to 1.69)	45 fewer per 1,000 (from to 29 more)	⊕⊖⊖⊖ Very low	
ICU admi	ICU admission											
1	observational studies	serious <sup>a</sup>	not serious	not serious	very serious <sup>b</sup>	none	0/5 (0.0%)	0/5 (0.0%)	not estimable		⊕⊖⊖⊖ Very low	

CI: confidence interval; OR: odds ratio

### **Explanations**

a. The studies utilized for this outcome were rated high risk of bias on the Newcastle Ottawa Scale.

c. This outcome was underpowered.

b. The confidence interval for this outcome crosses the threshold of significance.

# **KQ1: Pediatrics**

Author(s):

Question: Operative management compared to nonoperative management for patients with disease processes amenable to either approach and active COVID infection

Setting:
Bibliography: . [Intervention] for [health problem]. Cochrane Database of Systematic Reviews [Year], Issue [Issue].

Certainty assessment							№ of patients		Effect			
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	operative management	nonoperative management	Relative (95% CI)	Absolute (95% CI)	Certainty	Importance
ICU admiss	ICU admission											
1	observational studies	serious <sup>a</sup>	not serious	not serious	serious <sup>b</sup>	none	3/165 (1.8%)	9/416 (2.2%)	OR 0.84 (0.22 to 3.13)	3 fewer per 1,000 (from 17 fewer to 43 more)	⊕⊖⊖⊖ Very low	

CI: confidence interval; OR: odds ratio

## **Explanations**

- a. The study utilized for this outcome was rated high risk of bias on the Newcastle Ottawa Scale. b. The confidence interval for this outcome crosses the threshold of significance.

# **KQ2: Adults**

Author(s):
Question: A longer delay compared to shorter delay for elective cases in patients with recent COVID infection
Setting:
Bibliography: . [Intervention] for [health problem]. Cochrane Database of Systematic Reviews [Year], Issue [Issue].

Certainty	y assessment						№ of patients		Effect			
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	a longer delay	shorter delay	Relative (95% CI)	Absolute (95% CI)	Certainty	Importance
5	observational studies	not serious	serious <sup>a</sup>	not serious	not serious	strong association	372/27448 (1.4%)	521/13567 (3.8%)	OR 0.32 (0.21 to 0.50)	26 fewer per 1,000 (from 30 fewer to 19 fewer)	⊕⊕○○ Low	
MI												
1	observational studies	not serious	not serious	not serious	not serious	none	649/25993 (2.5%)	371/11361 (3.3%)	OR 0.76 (0.67 to 0.86)	8 fewer per 1,000 (from 11 fewer to 4 fewer)	⊕⊕○○ Low	
DVT/ PE	Ε						<u> </u>					•
3	observational studies	not serious	not serious	not serious	not serious	none	701/27664 (2.5%)	432/12601 (3.4%)	OR 0.73 (0.65 to 0.83)	9 fewer per 1,000 (from 12 fewer to 6 fewer)	⊕⊕○○ Low	

CI: confidence interval; OR: odds ratio

Explanations
a. I2 value of 65.

### **KQ2: Pediatrics**

Author(s):
Question: A longer delay compared to shorter delay for elective cases in pediatric patients with recent COVID infection
Setting:
Bibliography: . [Intervention] for [health problem]. Cochrane Database of Systematic Reviews [Year], Issue [Issue].

			Certainty as	ssessment			№ of p	№ of patients		t		
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	a longer delay	shorter delay	Relative (95% CI)	Absolute (95% CI)	Certainty	Importance
Mortality												
1	observational studies	serious <sup>a</sup>	not serious	not serious	very serious <sup>b,c</sup>	none	1/2 (50.0%)	0/11 (0.0%)	OR 23.00 (0.61 to 862.86)	0 fewer per 1,000 (from 0 fewer to 0 fewer)	⊕⊖⊖⊖ Very low	
DVT/PE												
1	observational studies	serious <sup>a</sup>	not serious	not serious	very serious <sup>b,c</sup>	none	0/2 (0.0%)	1/11 (9.1%)	OR 1.40 (0.04 to 45.68)	32 more per 1,000 (from 87 fewer to 729 more)	⊕⊖⊖⊖ Very low	
Ventilation	time											
1	observational studies	serious <sup>a</sup>	not serious	not serious	very serious <sup>b,c</sup>	none	2	11	-	MD 6.68 higher (8.12 lower to 21.48 higher)	⊕⊖⊖⊖ Very low	

CI: confidence interval; MD: mean difference; OR: odds ratio

## **Explanations**

- a. This out come is based on one study which was deemed to be at high risk of bias utilizing the Newcastle Ottawa Scale.
- b. This study was underpowered.
- c. The confidence interval for this outcome crosses the threshold of significance.