

AAA Screening Excluded Studies List

Population

1. Alerci M, Oberson M, Fogliata A, Gallino A, Vock P, Wytttenbach R. Prospective, intraindividual comparison of MRI versus MDCT for endoleak detection after endovascular repair of abdominal aortic aneurysms.[Erratum appears in Eur Radiol. 2009 May;19(5):1302-3]. Eur Radiol. 2009;19(5):1223-31.
2. Beinfeld MT, Wittenberg E, Gazelle GS. Cost-effectiveness of whole-body CT screening. Radiology. 2005;234(2):415-22.
3. Biancari F, Paone R, Venermo M, D'Andrea V, Perala J. Diagnostic accuracy of computed tomography in patients with suspected abdominal aortic aneurysm rupture. Eur J Vasc Endovasc Surg. 2013;45(3):227-30.
4. Hassan C, Pickhardt PJ, Laghi A, Zullo A, Kim DH, Iafrate F, et al. Impact of whole-body CT screening on the cost-effectiveness of CT colonography. Radiology. 2009;251(1):156-65.
5. Inamdar U, Wira CR. The presenting signs and symptoms of ruptured abdominal aortic aneurysms: A meta-analysis of the literature. Acad Emerg Med. 2012;19:S53.
6. MacDonald AJ, Faleh O, Welch G, Kettlewell S. Missed Opportunities for the Detection of Abdominal Aortic Aneurysms. Eur J Vasc Endovasc Surg. 2008;35(6):698-700.
7. Reed MJ, Burfield LC. Initial emergency department coagulation profile does not predict survival in ruptured abdominal aortic aneurysm. Eur J Emerg Med. 2013;20(6):397-401.
8. Stroncek C, Swickhamer C, Chan SB. Resident-performed abdominal ultrasounds in the emergency department: Correlation with radiologists. Ann Emerg Med. 2011;1):S204.

Intervention

1. Blaivas M, Theodoro D. Frequency of incomplete abdominal aorta visualization by emergency department bedside ultrasound. Acad Emerg Med. 2004;11(1):103-5.
2. Cho JJ, Jang SY, Chang HJ, Shin S, Shim CY, Hong GR, et al. Aortic aneurysm screening in a high-risk population: A non-contrast computed tomography study in Korean males with hypertension. Korean Circulation Journal. 2014;44(3):162-9.
3. Eckroth-Bernard KR, Garvin RP, Ryer EJ, Elmore JR, Franklin DP. Routine ambulatory medical care fails to diagnose patients with abdominal aortic aneurysms at risk for rupture. J Vasc Surg. 2012;56 (3):887.
4. Lynch RM. Accuracy of abdominal examination in the diagnosis of non-ruptured abdominal aortic aneurysm. Accid Emerg Nurs. 2004;12(2):99-107.

Comparison Group

1. Aboyans V, Bataille V, Bliscaux P, Ederhy S, Filliol D, Honton B, et al. Effectiveness of screening for abdominal aortic aneurysm during echocardiography. Am J Cardiol. 2014;114(7):1100-4.

2. Glover MJ, Kim LG, Sweeting MJ, Thompson SG, Buxton MJ. Cost-effectiveness of the National Health Service Abdominal Aortic Aneurysm Screening Programme in England. *Br J Surg.* 2014;101(8):976-82.
3. Svensjo S, Mani K, Bjorck M, Lundkvist J, Wanhainen A. Screening for abdominal aortic aneurysm in 65-year-old men remains cost-effective with contemporary epidemiology and management. *Eur J Vasc Endovasc Surg.* 2014;47(4):357-65.

Outcomes

1. Abbas A, Smith A, Cecelja M, Waltham M. Assessment of the accuracy of AortaScan for detection of abdominal aortic aneurysm (AAA). *Eur J Vasc Endovasc Surg.* 2012;43(2):167-70.
2. Azhar B, Patel SR, Holt PJE, Hinchliffe RJ, Thompson MM, Karthikesalingam A. Misdiagnosis of ruptured abdominal aortic aneurysm: Systematic review and meta-analysis. *J Endovasc Ther.* 2014;21(4):568-75.
3. Concannon E, McHugh S, Healy DA, Kavanagh E, Burke P, Moloney MC, et al. Diagnostic accuracy of non-radiologist performed ultrasound for abdominal aortic aneurysm: Systematic review and meta-analysis. *Int J Clin Pract.* 2014;68(9):1122-9.
4. Chiu KWH, Ling L, Tripathi V, Ahmed M, Shrivastava V. Ultrasound measurement for abdominal aortic aneurysm screening: A direct comparison of the three leading methods. *Eur J Vasc Endovasc Surg.* 2014;47(4):367-73.
5. 2. Conway AM, Malkawi AH, Hinchliffe RJ, Holt PJ, Murray S, Thompson MM, et al. First-year results of a national abdominal aortic aneurysm screening programme in a single centre. *Br J Surg.* 2012;99(1):73-7.
6. 3. Gray C, Goodman P, Badger SA, O'Malley MK, O'Donohoe MK, McDonnell CO. Comparison of colour duplex ultrasound with computed tomography to measure the maximum abdominal aortic aneurysmal diameter. *Int J Vasc Med.* 2014;2014(574762).
5. Hager J, Lanne T, Carlsson P, Lundgren F. Lower prevalence than expected when screening 70-year-old men for abdominal aortic aneurysm. *Eur J Vasc Endovasc Surg.* 2013;46(4):453-9.
6. Lucarotti M, Heather B, Shaw E, Poskitt K. Psychological morbidity associated with abdominal aortic aneurysm screening. *Eur J Vasc Endovasc Surg.* 1997;14(6):499-501.
7. Meecham L, Evans R, Buxton P, Allingham K, Hughes M, Rajagopalan S, et al. Abdominal aortic aneurysm diameters: A study on the discrepancy between inner to inner and outer to outer measurements. *Eur J Vasc Endovasc Surg.* 2015;49(1):28-32.
8. Sogaard R, Laustsen J, Lindholt JS. Cost effectiveness of abdominal aortic aneurysm screening and rescreening in men in a modern context: Evaluation of a hypothetical cohort using a decision analytical model. *BMJ (Online).* 2012;344(7865).

Study Design

1. Crow P, Shaw E, Earnshaw J, Poskitt K, Whyman M, Heather B. A single normal ultrasonographic scan at age 65 years rules out significant aneurysm disease for life in men. *Br J Surg.* 2001;88(7):941-4.

2. d'Audiffret A, Santilli S, Tretinyak A, Roethle S. Fate of the ectatic infrarenal aorta: expansion rates and outcomes. *Ann Vasc Surg.* 2002;16(5):534-6.
3. Devaraj S, Dodds S. Ultrasound surveillance of ectatic abdominal aortas. *Ann R Coll Surg Engl.* 2008;90(6):477.
4. Emerton M, Shaw E, Poskitt K, Heather B. Screening for abdominal aortic aneurysm: a single scan is enough. *Br J Surg.* 1994;81(8):1112-3.
5. Lindholt JS, Vammen S, Juul S, Fasting H, Henneberg E. Optimal interval screening and surveillance of abdominal aortic aneurysms. *Eur J Vasc Endovasc Surg.* 2000;20(4):369-73.
6. Scott R, Vardulaki K, Walker N, Day N, Duffy S, Ashton H. The long-term benefits of a single scan for abdominal aortic aneurysm (AAA) at age 65. *Eur J Vasc Endovasc Surg.* 2001;21(6):535-40.
7. Shreibati JB, Baker LC, Hlatky MA, Mell MW. Impact of the Screening Abdominal Aortic Aneurysms Very Efficiently (SAAAVE) Act on abdominal ultrasonography use among Medicare beneficiaries. *Arch Intern Med.* 2012;172(19):1456-62.
8. Wild JB, Stather PW, Biancari F, Choke EC, Earnshaw JJ, Grant SW, et al. A multicentre observational study of the outcomes of screening detected sub-aneurysmal aortic dilatation. *Eur J Vasc Endovasc Surg.* 2013;45(2):128-34.