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Gama AP, Santos IS, Olmos RD, Pinto LMO, Benseñor IJM, Lotufo PA. C-reactive protein as an inflammatory marker of acute infections outside intensive care settings: case report and evidence-based literature review. Autopsy Case Rep [Internet]. 2011;1(3):3-9. http://dx.doi.org/10.4322/acr.2011.011

On page 6, the Chart 1 was constructed incorrectly.

Chart 1 – How to calculate LR+, LR– and how to interpret test results. Adapted from Hatanaka.¹⁰

How to calculate LR+:
Probability of positive test in individuals with disease
Probability of positive test in individuals without disease
How to calculate LR-:
Probability of negative test in individuals with disease
Probability of negative test in individuals without disease
LR >10.0 or LR< 0.1
Very good test, almost always impacts on clinical judgement
LR 5.0-10.0 or 0.1-0.2
Intermediate test value, can impact on clinical judgement
LR 2.0-5.0 or 0.2-0.5
Weak test, seldom changes clinical judgement
LR 0.5-2.0
Test is incapable of changing clinical judgement, it must not be performed'

The right presentation is as follows below:

Chart 1 – How to calculate LR+, LR– and how to interpret test results. Adapted from Hatanaka¹⁰

How to calculate LR+:
Probability of positive test in individuals with disease
Probability of positive test in individuals without disease
How to calculate LR-:
Probability of negative test in individuals with disease
Probability of negative test in individuals without disease
LR >10.0 or LR< 0.1
Very good test, almost always impacts on clinical judgement
LR 5.0-10.0 or 0.1-0.2
Intermediate test value, can impact on clinical judgement
LR 2.0-5.0 or 0.2-0.5
Weak test, seldom changes clinical judgement
<u>LR 0.5-2.0</u>
Test is incapable of changing clinical judgement, it must not be performed