

DHS - Office of Mental Health and Addiction Services

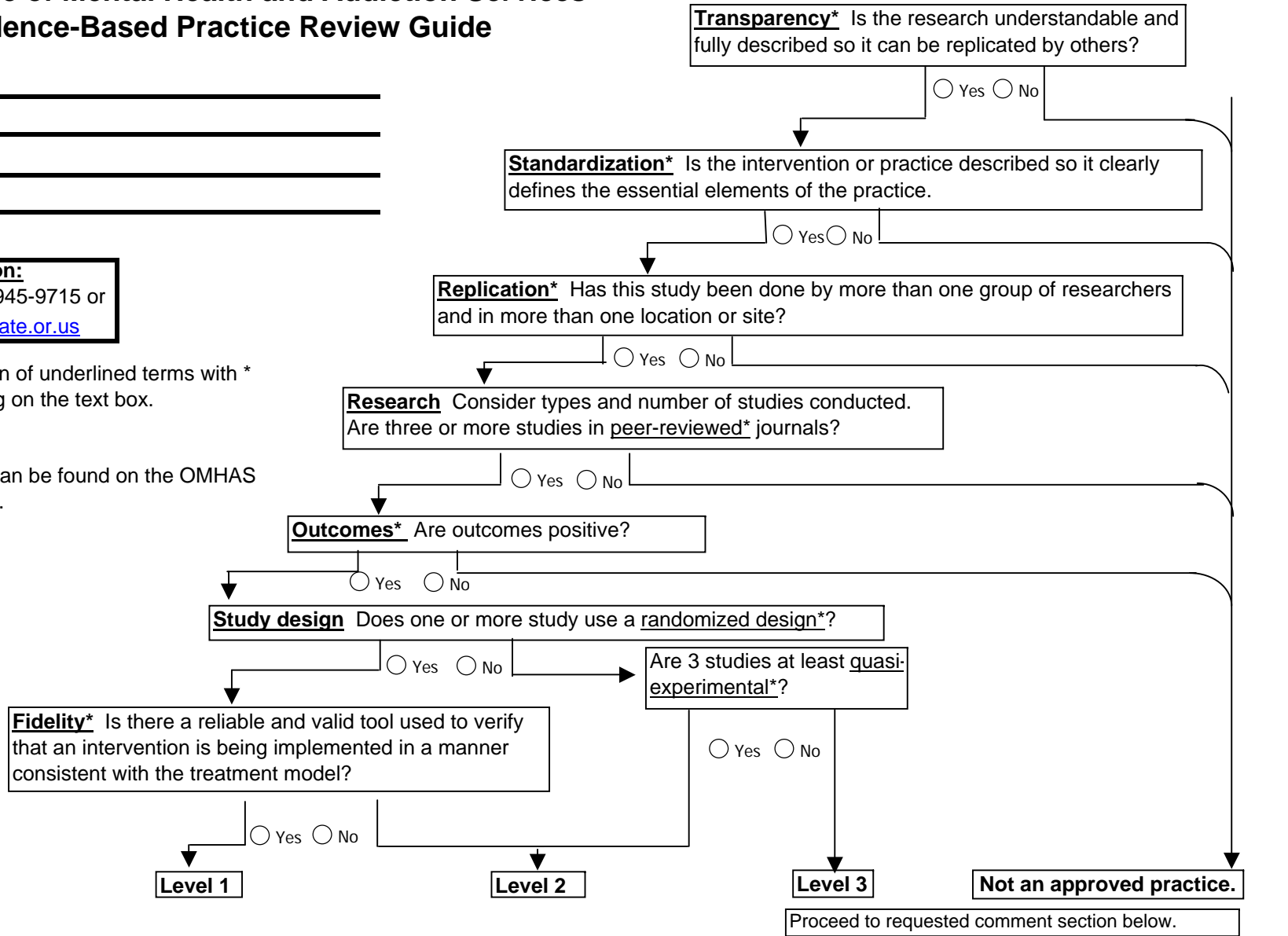
Evidence-Based Practice Review Guide

EBP Name: _____
 Reviewer: _____
 EBP Level of practice: _____
 Date: _____

Contact Person:
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*A more specific definition of underlined terms with * can be viewed by clicking on the text box.

** Additional definitions can be found on the OMHAS EBP definition document.



Required Comment Section:

Explain the rationale for the level you have determined for the practice. If the practice is not an approved practice, provide justification.

- Level 4:** 0-2 studies; positive outcomes but not replicated research.
- Level 5:** Did not meet any of the criteria in OMHAS definition.
- Level 6:** Research shows no meaningful outcomes.