**Reviewer ID:** Emily Procter, Matthew Querée

**Type of Outcome Measure:** Donovan SCI Pain Classification System  
**Total articles:** 2

<table>
<thead>
<tr>
<th>Author ID</th>
<th>Year</th>
<th>Study Design</th>
<th>Setting</th>
<th>Population (sample size, age) and Group</th>
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</thead>
</table>
| Putzke et al.   | 2003       | Videotape ratings                                                           | SCI clinic at the University of Alabama at Birmingham                                             | N=28 (23M, 5F)  
Mean age 45.5±10.02yrs  
Recruited from the SCI clinic at the University of Alabama at Birmingham.  
Traumatic SCI, 21 paraplegic, 7 tetraplegic  
AIS A: 15  
AIS B: 7  
AIS C: 4  
AIS D: 2  
Mean Time since Injury 10.3±7.2yrs  
Reported chronic (>6mo) pain in 1 or more sites. |
| Richards et al. | 2002       | Videotape ratings                                                           | Designed to assess interrater reliability of the Donovan classification system as well as the clinician-based usefulness of each classification criteria used in the Donovan system. | N=28 (23M, 5F)  
Mean age 45.5±10yrs  
Traumatic SCI  
21 paraplegia, 7 tetraplegia  
15 AIS A  
7 AIS B  
4 AIS C  
2 AIS D  
Mean time since injury (SD) = 10.3 (7.2) years |

### 1. RELIABILITY

<table>
<thead>
<tr>
<th>Author ID</th>
<th>Internal Consistency</th>
<th>Test-retest, Inter-rater, Intra-rater</th>
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| Richards et al. | No data available    | Three raters classified 60 pain sites for each participant using the Donovan system. They were given more detailed information incrementally and had to classify the pain after each step.  
The correlation between each pair of raters and at each stage of classification was determined with Kappa coefficients. Overall percentage of agreement (%AG) was calculated between all three raters and Bartholomew’s proportion analysis was used to indicate if %AG increased with each stage of additional information.  
Agreement between pairs of raters at different steps ranged from 62-73% (Kappa range 0.44-0.61) and overall agreement ranged from 50-62% (Kappa=0.55). %AG did not increase significantly (P>0.05) with each additional piece of information. |
| Putzke et al.   | No data available    | Patient assessments were videotaped and scored using the Donovan pain scheme on two occasions, separated by a 3 month interval. There were three raters.  
The overall test-retest reliability was 78%. The percent agreement for each type of pain was as follows: 67% for segmental nerve/cauda equina, 75% for visceral, 80% for mechanical and 84% for spinal cord. No pain data for psychic pain was reported. |
The percent agreement between the 3 raters (i.e. inter-rater reliability) at the 3 month assessment was 50%.

The rate of agreement within each rater (i.e. intra-rater reliability) ranged from 67 to 83%.

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<thead>
<tr>
<th>2. VALIDITY</th>
<th>– no data available</th>
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<tbody>
<tr>
<td>3. RESPONSIVENESS</td>
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<td>4. FLOOR/CEILING EFFECT</td>
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<td>5. INTERPRETABILITY</td>
<td>– no data available</td>
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