

1	observational studies	serious ¹	no serious inconsistency	serious ²	no serious imprecision	none	3187	1,418,613	RD 0.06 (0.01-0.11)	57 more per 1000 (from 7 to 106 more)	⊕○○○ VERY LOW	CRITICAL
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¹ All non-randomised studies automatically downgraded due to selection bias. Studies may be further downgraded by 1 increment if other factors suggest additional high risk of bias, or 2 increments if other factors suggest additional very high risk of bias.

² The majority of evidence did not differentiate between a reduction in ED opening hours, ED closures, or whole hospital closures.

Appendix G: Excluded clinical studies

Table 17: Studies excluded from the clinical review

Study	Exclusion reason
Anon 2015 ¹	Protocol only
Congdon 2001 ²	Statistical model: no interventions/outcomes of interest
El sayed 2012 ⁵	Incorrect intervention: Consolidation of 2 EDs to a single site
Fisher 2000 ⁶	Study design (descriptive)
Mitchell 2008 ¹⁰	Study design (descriptive)
Shen 2016	No extractable data
Sun 2006 ¹²	Whole hospital closing
Teljeur 2004 ¹³	Statistical model: no interventions/outcomes of interest

Appendix H: Excluded health economic studies

No health economic studies were excluded from this review.