## TABLE 1: AUA Nomenclature Linking Statement Type to Level of Certainty, Magnitude of Benefit or Risk/Burden, and Body of Evidence Strength

<table>
<thead>
<tr>
<th>Evidence Strength A</th>
<th>Evidence Strength B</th>
<th>Evidence Strength C</th>
</tr>
</thead>
<tbody>
<tr>
<td>(High Certainty)</td>
<td>(Moderate Certainty)</td>
<td>(Low Certainty)</td>
</tr>
</tbody>
</table>

### Strong Recommendation
(Net benefit or harm substantial)
- **Benefits > Risks/Burdens (or vice versa)**
- Net benefit (or net harm) is substantial
- Applies to most patients in most circumstances and future research is unlikely to change confidence

### Moderate Recommendation
(Net benefit or harm moderate)
- **Benefits > Risks/Burdens (or vice versa)**
- Net benefit (or net harm) is moderate
- Applies to most patients in most circumstances and future research is unlikely to change confidence

### Conditional Recommendation
(No apparent net benefit or harm)
- **Benefits = Risks/Burdens**
- Best action depends on individual patient circumstances
- Future research unlikely to change confidence

### Clinical Principle
A statement about a component of clinical care that is widely agreed upon by urologists or other clinicians for which there may or may not be evidence in the medical literature

### Expert Opinion
A statement, achieved by consensus of the Panel, that is based on members clinical training, experience, knowledge, and judgment for which there is no evidence