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**NOTE:** The bibliography for the Chronic Pain and Complex Regional Pain Syndrome Medical Treatment Guidelines reflects the articles, abstracts, and literature reviewed during the Chronic Pain and CRPS update process. Where applicable, literature was given a designation of one of the following: High quality, adequate, inadequate, or not applicable. It should be noted that some articles might have more than one designation, such as, ‘adequate’ on one concept and ‘high-quality’ on another concept. Literature with these designations is noted in the bibliography. Each designation was assigned in accordance with the related Study Questions.

Literature that was used to support evidence statements (eg. some, good, strong) is listed in the bibliography. Over 550 articles and literature were examined for consideration during the course of this update. A limited number of those articles qualified for evidence statements. The designated strength of the evidence may not coincide with acceptability of treatment. When the evidence is conflicting or inconclusive, acceptability of treatment is determined by a combination of available medical literature and group consensus. Some of the elements that are considered in making consensus determinations are: level of functional benefit, acceptable risk/morbidity/mortality, and acceptable cost.

A review of the Chronic Pain and CRPS Medical Treatment Guidelines bibliography needs to coincide with a review of the General Guidelines Principles. In particular, please review Guidelines Principle #12: Guidelines Recommendations and the Strength of Medical Evidence and Consensus Recommendations. All recommendations in the guidelines are considered to represent reasonable care in appropriately selected cases, regardless of the level of evidence or consensus attached to it. Those procedures considered inappropriate, unreasonable, or unnecessary are designated in the guideline as 'not recommended.'