Screening agreement: the kappa card

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Your 2×2 table. Rows are screener A, columns screener B. Count only records both of you decided.

	B includes	B excludes	Total
A includes	a =	b =	
A excludes	c =	d =	
Total			n =

Your figures. The example column is the guide's worked example: a = 90, b = 40, c = 60, d = 1,810 (illustrative).

Figure	Formula	Example	Yours
Observed agreement, p_0	$(a + d) / n$	0.95	
Percent agreement	$p_0 \times 100$	95%	
Chance agreement, p_e	$[(a + b)(a + c) + (c + d)(b + d)] / n^2$	0.86975	
Cohen's kappa, κ	$(p_0 - p_e) / (1 - p_e)$	0.62	
PABAK	$2p_0 - 1$	0.90	

Round only at the end. κ and PABAK cannot be larger than p_0.

The same differences, two kappas (illustrative). Both sets have 60 differences in 1,000 records.

Set	a	b	c	d	Included by each	p_0	κ	PABAK
Typical screen	40	30	30	900	7%	0.94	0.54	0.88
Balanced set	440	30	30	500	47%	0.94	0.88	0.88

What the standards ask (checked 29 Sep 2026)

- PRISMA 2020 item 8: how many people screened, whether independently, and any automation. No statistic.
- Cochrane Handbook: no agreement threshold for screening.
- Cochrane Rapid Reviews Methods Group (2026): κ of 0.80 or more is its example for moving from dual screening of a proportion to single screening.
- JBI scoping reviews: a pilot of 25 records; screening starts once percent agreement is 75% or more.

Before you count, write down how Maybe counts (for example, as Include) and which records the figure covers: a pilot, a proportion, or all.

For your methods: Agreement was [x]% (Cohen's κ = [k]; PABAK = [p]), with Maybe counted as Include; the 2×2 table is in Supplement [S].

Sources: Page MJ et al. BMJ 2021;372:n71 (item 8). Cochrane Handbook v6.5.1, chapter 4 (2025). Garritty C et al. Cochrane Evid Synth Methods 2026;4(4):e70092. JBI Manual for Evidence Synthesis (2024), 10.2.7.1. Byrt T et al. J Clin Epidemiol 1993;46:423–9. Chen G et al. BMC Med Res Methodol 2009;9:5. The full guide, with every source: evensift.com/guides/cohens-kappa-screening/

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