**Summary:** There is an impetus in research purporting best practices in curriculum integration, however, more standardised, evidence-informed design and reporting of interventions and their outcomes are required to strengthen evidence in this area.

**Objectives:** Integrated curricula is being adopted within healthcare programmes with a growing number of curriculum evaluations being undertaken and reported. A framework exists to guide educationalists in the planning, design and implementation of integrated curricula. This study presents a systematic appraisal of the evidence on how healthcare students experience and perform within integrated interventions. Six electronic databases: Medline, Embase, Scopus, Psych-INFO, CINHAL and ProQuest were systematically searched in September 2018. Studies reporting on undergraduate healthcare students providing feedback, or performing at an assessment after experiencing integrated curricula were included. Studies were assessed for methodological quality and risk of bias using the Joanna Briggs Institute critical appraisal checklist. Studies were appraised against the implementation framework to facilitate contextual understanding of the intervention and findings.

**Findings:** Forty studies from programmes in medicine, pharmacy and dentistry worldwide met the inclusion criteria and were included (Fig 1). Interdisciplinary level integration was the most widely adopted, with a wide range of teaching and learning strategies employed in the delivery. Students appear to perform similarly or conservatively better after experiencing integrated education, however adopted study designs preclude the deduction of a direct causal relationship. Students report generally positive feedback on their integrated experiences, claiming the development of a wide range of skills. However, authors provide insufficient detail about the integrated educational developments to best inform future educationalists on the best systems for curriculum integration.