JGPT Reviewer 'Read-along' Template

REVIEW SECTIONS	Does the author need to improve this section? If so, how?
TITLE • Concisely & accurately conveys what was done in the study • Includes the population(s) under study (community-dwelling, hospitalized, etc.) • Includes type of study if appropriate (RCT, Systematic Review, etc.)	

ABSTRACT
• Concisely & accurately summarizes the study & major findings; avoids excessive detail
• Background
  ○ Identifies the problem
  ○ States the purpose of the study
• Methods
  ○ States the study design, population(s), setting(s) if appropriate
  ○ Explains group allocation if appropriate
  ○ Identifies all measures used, when & where measures were taken, etc.
  ○ Describes any intervention(s) provided including mode & dose (frequency, intensity, duration, etc.)
  ○ Indicates the type of statistical analysis used	

• Results
  ○ Reports statistical significance of results
  ○ Reports clinical significance of results
• Conclusions
  ○ Succinctly describes what the major study findings mean
  ○ Includes a statement of clinical relevance or impact	

INTRODUCTION • Well-organized; proceeds in a logical sequence to lead the reader to the study purpose and/or hypotheses • Identifies the important problem to be addressed • Demonstrates a strong grasp of the prior literature through a summary description of *what is already known* • Explains *what is NOT known* (identifies knowledge gap) • Presents a strong rationale for *why it is important to address the knowledge gap;* Why is it crucial to conduct this study? • States the purpose(s) of the study; this may include one or more hypotheses to be investigated • Explains why it would be *clinically valuable* to know the answer(s) to the question(s)	

METHODS
• Specifies the type of study design
  ○ Is this the correct design to use to test the hypotheses & answer the question(s)?
  ○ Retrospective? Prospective?
• Study IRB approved?
• If intervention study (clinical trial), registration number provided?
• Identifies the study population(s)
• Indicates how participants were recruited, & from where
• Presents inclusion and exclusion criteria
• Informed consent obtained?
• If groups were created, how was group allocation accomplished?
  ○ Was this allocation method free of bias? Does it avoid exerting a systematic influence on the outcome? (e.g., concurrent or consecutive enrollment)
• Reports that the necessary sample size was calculated beforehand ('a priori') in order to achieve a statistical power of at least 0.80 (80%) at a minimum, higher is better.
• Describes each test or measure used to measure or predict outcomes
  ○ Are standardized measures used?
  ○ Are client-centered measures used (alone or in combination with other measures; e.g., activity-level, participation level, or QoL measures)?
  ○ For each measure, is the established validity, reliability,	

and Minimal Detectable Change (MDC) reported?
• Describes the testing process
  ○ When and how many times the tests were conducted
  ○ Who administered the tests; were they trained to do this?
  ○ Were testers blinded to group allocation?
• If participants were followed over time, indicates how outcomes were determined (re-testing, telephone interview, diary, review of documentation, etc.)
• Describes the intervention so explicitly it could be replicated (if lengthy, use of appendices or supplemental digital content is acceptable; if previously published, use of citation is acceptable following a brief summary)
  ○ Includes mode and dose (frequency, intensity and duration)
  ○ If mode was different between groups, was dose held constant for both groups?
  ○ Was the dose provided adequate to produce change?
  ○ Who delivered the intervention? Were they blinded to prior test results? Were they trained to deliver the intervention properly?
• Explains what statistical analyses were used
  ○ Were these appropriate for the data? Correctly selected?
  ○ If there were multiple outcome variables, were they analyzed	

with a multivariate omnibus test (e.g., MANOVA), followed by univariate tests, followed by post hoc tests? Did they control for baseline differences? For Type I or Family-wise error? ○ If outcome measures were conducted on multiple occasions, was a repeated measures design used? ○ If there were multiple comparisons or multiple correlations, was statistical correction applied to control error rate (e.g., Bonferroni, Benjamini-Hochberg, etc.)?	
RESULTS • States results clearly, in a logical & consistent sequence • Were groups equivalent on all influential characteristics and outcome measures at baseline? If not, was this difference controlled for statistically? • For each dependent variable, reports the actual statistical power of the analysis to detect differences/associations. If non-significant findings are reported and the power is < 0.80 (80%), the study was underpowered to find differences or associations that may actually exist. • If this is a RCT or longitudinal study, is a CONSORT (or other similar) flow chart illustrating the progress of participants through the study included?	

• Reports statistical significance/non-significance (within- and between-groups) using actual p-values (versus just <0.05 or <0.01; with the exception of <0.001)
• Reports clinical significance/non-significance (within- and between-groups); amount of change relative to the MDC or MCID, effect size, etc.
• Includes data details in Tables; for each outcome variable:
  ○ Units of measurement are stated
  ○ When appropriate, includes means/medians, SDs or SE's, confidence intervals, p-values, power to detect differences/associations; effect sizes, whether or not the MDC was met or exceeded.
  ○ When appropriate, includes relative risk (RR) or odds ratio (OR)
  ○ When appropriate, includes AUC, sensitivity, specificity, positive & negative likelihood ratios, positive & negative post-test probabilities
• If appropriate, illustrates testing, intervention, and/or results using figures
  ○ If graphs, axes are labeled with units of measurement
  ○ Would additional figures help the reader understand the study better?	

DISCUSSION • <u>Briefly</u> summarizes the major statistically significant/non-significant and clinically significant/non-significant findings, stating significant findings first. • Relates the findings to the original question(s) or hypotheses	

• Explains the *meaning* of the findings
• Explicitly addresses the clinical implications of the findings
  ○ How should findings be applied clinically?
• Discusses the degree to which these new findings fit with what was already known
• If findings different than prior studies, provides possible reasons for the differences
• Includes a Limitations section
  ○ Strengths of the study
  ○ Weaknesses of the study, and how these may have influenced study results
  ▪ Sources of bias
• Suggests possible future research directions	

CONCLUSION • <u>Briefly</u> summarizes the meaning of the findings • Clearly states the clinical relevance of the work	
REFERENCES • Are the majority recent (last 10 years)? • Are any important references missing? • Do the references actually support the points made in the text?	
THROUGHOUT THE MANUSCRIPT • Do you consider the use of written English in this paper to be "publication ready"? ○ If not, ***do not spend a great deal of your time copy-editing the manuscript; tell the author if it is***	

inadequate. Provide a few select examples. It is the author's responsibility to have their paper proof-read and copy-edited. • Was unsupported opinion and conjecture avoided? • Was there any apparent bias that went unrecognized or wasn't mentioned? • Did each paragraph proceed logically to the next? Or were there 'jumps' from "Point A' to 'Point C' where an interim paragraph would help the reader follow?	