

CURRENT STATUS REVIEWS INSTRUCTIONS FOR AUTHORS

All authors intending to submit a systematic review with or without a meta-analysis should perform a search of PROSPERO (<https://www.crd.york.ac.uk/prospero/>) to ensure that a similar work is not currently planned and/or in progress. If similar work is not identified, then the systematic review must be registered on PROSPERO prior to submission to DCR.

NOTE: *The journal will consider the following as review articles:* Systematic reviews with or without meta-analyses

NOTE: *The journal will **not** consider the following as review articles:* Other types of review articles such as advances in diagnosis and treatment (complete systematic search of the literature, but only of the last 5 years of published literature) and narrative review will not be considered for peer-review.

Titles

Titles for these reviews should include a concise description of the main topic. Use specific and not overly broad wording for the title; the type of review should be indicated in the subtitle. For example: “Surgical Management of Uncomplicated Sigmoid Diverticulitis: A Systematic Review”

Systematic Review (without meta-analysis)

Systematic reviews are critical assessments of the literature and data sources pertaining to clinical topics, emphasizing factors such as cause, diagnosis, prognosis, therapy, or prevention. Systematic Reviews should address a specific question or issue that is relevant for clinical practice and provide an evidence-based, balanced, patient-oriented review on a focused topic. Follow EQUATOR Reporting.

Guidelines

Maximum length is 3500 words of text (not including abstract, tables, figures, acknowledgments, references, and online-only material), with no more than a total of 5 tables and/or figures and no more than 50-75 references.

Important Components of a Systematic Review

Abstract (no more than 300 words)

Structured headers for abstracts

A structured abstract is required; systematic review articles should include a structured abstract of no more than 300 words using the following format: Background, Objective, Data Sources, Study Selection, Intervention(s), Main Outcome Measures, Results, Limitations, Conclusions. BE SURE TO USE THESE

SPECIFIC HEADERS WHEN FORMATTING AND SUBMITTING THE ABSTRACT WITH YOUR PAPER. If not done, the paper will be returned to authors for compliance prior to any review process.

Methods/Literature Search

The literature search should be as current as possible, ideally with end dates within a month or two before manuscript submission. A search of the primary literature should be conducted, including multiple bibliographic databases (eg, PubMed/MEDLINE, Embase, CINAHL, PsycINFO). This can be facilitated by collaborating with a medical librarian to help with the search. Briefly describe characteristics of the literature searched and include in the review, following the PRISMA reporting guidelines, including the bibliographic databases and other sources searched, search terms used, dates included in the search, date the literature search was conducted, screening process, language limitations, and inclusion and exclusion criteria. The rating system used to evaluate the quality of the evidence should be specified, and the methods used to evaluate quality should be described, including number of quality raters, how agreement on quality ratings was assessed, and how disagreements on quality ratings were resolved.

The highest-quality evidence (eg, randomized clinical trials, meta-analyses, systematic reviews, and high-quality prospective cohort studies) should receive the greatest emphasis. Clinical practice guidelines ordinarily should not be used as a primary component of the evidence base for the systematic review, although relevant guidelines should be addressed in the discussion section of the article. *Small retrospective chart reviews, case series, and case reports should not be included in the analysis.* The search methods should be described in sufficient detail so the search can be reproduced based on the information provided in the manuscript. *A summary of the methods of the literature search including this information should be included in the main article.* A PRISMA-style flow diagram showing this information should also be included.

Quality Rating Scheme for Studies and Other Evidence

- 1 Properly powered and conducted randomized clinical trial; systematic review with meta-analysis
- 2 Well-designed controlled trial without randomization; prospective comparative cohort trial
- 3 Case-control studies; retrospective cohort study
- 4 Case series with or without intervention; cross-sectional study
- 5 Opinion of respected authorities; case reports

There are several other preferred systems for rating the quality of evidence in review articles. For reviews that synthesize findings from numerous studies into a single summary recommendation, use the rating scale shown above or the *Oxford Centre for Evidence-based Medicine's Levels of Evidence and Grades of Recommendation*. For reviews that include diagnostic studies, use *The Rational Clinical Examination Levels of Evidence* table.

Meta-analysis

These manuscripts are systematic, critical assessments of literature and data sources pertaining to clinical topics, emphasizing factors such as cause, diagnosis, prognosis, therapy, or prevention, and that include a statistical technique for quantitatively combining the results of multiple studies that measure the same outcome into a single pooled or summary estimate. All articles or data sources should be searched for and selected systematically for inclusion and critically evaluated, and the search and selection process should be described in the manuscript. The specific type of study or analysis, population, intervention, exposure, and tests or outcomes should be described for each article or data

source. The data sources should be as current as possible, ideally with the search having been conducted within several months of manuscript submission.

REQUIRED CHECKLISTS

- Authors of reports of meta-analyses of clinical trials should submit the PRISMA flow diagram and checklist.
- Authors of meta-analyses of observational studies should submit the MOOSE checklist. Follow EQUATOR Reporting Guidelines.