## JGPT Reviewer ‘Read-along’ Template

| REVIEW SECTIONS | Does the author need to improve this section?  
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td></td>
<td>If so, how?</td>
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</tbody>
</table>

### 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
<table>
<thead>
<tr>
<th>Results</th>
<th>Conclusions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Reports statistical significance of results</td>
<td>• Succinctly describes what the major study findings mean</td>
</tr>
<tr>
<td>• Reports clinical significance of results</td>
<td>• Includes a statement of clinical relevance or impact</td>
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</table>

**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
  o Is this the correct design to use to test the hypotheses & answer the question(s)?
  o 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?
  o 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
  o Are standardized measures used?
  o Are client-centered measures used (alone or in combination with other measures; e.g., activity-level, participation level, or QoL measures)?
  o 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:
  o Units of measurement are stated
  o 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.
  o When appropriate, includes relative risk (RR) or odds ratio (OR)
  o 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
  o If graphs, axes are labeled with units of measurement
  o Would additional figures help the reader understand the study better?

DISCUSSION
• Briefly 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
- Briefly 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?