Journal of Health Sciences – Reviewer's guidelines

If a paper is clearly flawed beyond redemption, feel free to be brief, offer a few constructive comments and criticisms, and submit a recommendation for rejection. We would prefer that you devote your valuable time and expertise to better papers that are worth of revision and possible acceptance.

In your confidential comments, please advise if readers will enjoy the paper. Will it have broad or narrow appeal? Is the paper too technical or specialized? You are probably an expert in the topic. Authors tend to write with their expert colleagues in mind. However, our readers are 50% general healthcare providers, with the remaining 50% divided among multiple subspecialties. Thus, a paper on a subspecialty topic will be read by a fairly small percentage of same subspecialty experts; the remaining readers need to be attracted to the paper by an interesting and clear abstract, brevity, and a clear and applicable clinical message. Thank you for helping to point this out to authors.

COURTESY: Please be polite. Most papers are not going to be accepted and authors are disappointed (at best) to receive a rejection letter. At the least, we must be gracious with our comments and offer succinct and constructive advice and criticism. When possible, embed a compliment or favorable comment. When you criticize, consider how you would feel reading the criticism as an author.

LANGUAGE: Many authors are writing in a second or even third language. The writing must be excellent when the paper is in final form, but we can review papers with poor writing as long as the science is understandable. If you have time, offer suggestions for improved writing in your comments to the authors. If you do not have time, simply make a polite comment that writing assistance will be needed. Importantly, if you are going to criticize the writing, please do your best to write clearly and correctly.

CONTENT QUALITY AND ORIGINALITY: Is the article sufficiently novel and interesting to warrant publication? Does it add to the canon of knowledge? Does the article adhere to the journal's standards? Is the research question an important one? In order to determine its originality and appropriateness for the journal, it might be helpful to think of the research in terms of what percentile it is in? Is it in the top 25% of papers in this field? You might wish to do a quick literature search using tools such as PubMed to see if there are any reviews of the area. If the research has been covered previously, pass on references of those works to the editor.

ORGANIZATION AND CLARITY:

Title: Does it clearly describe the article?

Abstract: Does it reflect the content of the article?

Introduction: Does it describe what the author hoped to achieve accurately, and clearly state the problem being investigated? Normally, the introduction should summarize relevant research to provide context, and explain what other authors' findings, if any, are being challenged or extended. It should describe the experiment, the hypothesis(es) and the general experimental design or method.

Methods: Does the author accurately explain how the data was collected? Is the design suitable for answering the question posed? Is there sufficient information present for you to replicate the research? Does the article identify the procedures followed? Are these ordered in a meaningful way? If the methods are new, are they explained in detail? Was the sampling appropriate? Have the equipment and materials been adequately described? Does the article make it clear what type of data was recorded; has the author been precise in describing measurements? Is the study design clear? Is there a clearly stated a priori hypothesis? Is there a clearly stated primary outcome? Is the outcome a good one – for example, is it clinically relevant to patients? For surrogate outcomes are there reliable data linking the surrogate outcome to a clinically relevant one? Be wary of composite outcomes.

Is the sample size adequate? For negative studies, is there sufficient power to rule out a clinically relevant difference if one exists?

In regards to observational case series (cohort studies, case-control studies, population based studies, cross-sectional studies, etc.): Prospective is better than retrospective. Larger sample sizes are better than smaller. Longer follow up is better than shorter.

For all papers, it is important to explain inclusion and exclusion criteria. Readers will want to apply the results and recommendations to their patients. They need to know who was in the study (eligible) and who was not in it (not eligible or excluded) to understand if the patient in their office might have been eligible to be in the study. If the patient meets the inclusion/exclusion criteria, the study results, if valid, may apply.

Is follow-up complete? For patients lost to follow up, are baseline case mix features similar to those reported on? Common errors in case series reporting include the use of "final" outcomes or the last follow up data. This is prone to bias since patients followed longer tend to be different from those not followed. When possible, authors should report outcomes at set time points such as one, two, or five years.

Watch for regression to the mean.

Is there IRB approval? Are there other ethical or regulatory issues? Conflict of interest issues?

Results: This is where the author/s should explain in words what he/she discovered in the research. It should be clearly laid out and in a logical sequence. You will need to consider if the appropriate analysis has been conducted. Are the statistics correct? If you are not comfortable with statistics, please advise the editor when you submit your report. Interpretation of results should not be included in this section.

Conclusion/Discussion: Are the claims in this section supported by the results, do they seem reasonable? Have the authors indicated how the results relate to expectations and to earlier research? Does the article support or contradict previous theories? Does the conclusion explain how the research has moved the body of scientific knowledge forward? Are the conclusions appropriate? For instance, can the authors justifiably claim that a treatment is "safe?" To detect an unexpected serious adverse event that occurs 1% of the time a sample size of 300 is needed. A sample size of 100 can find 3% rates.

Are claims overstated? Is there marketing or "hype" embedded in the text? The data should be clearly spelled out but it is best for readers to interpret it without the benefit of embedded "spin" from authors.

Tables, Figures, Images: Are they appropriate? Do they properly show the data? Are they easy to interpret and understand? Tables and figures take a lot of space. Are they as clear as they can be? Are all needed? Could some tables or figures be moved online only? Material should not be duplicated. If the authors give data in a table, it need not be reiterated in the text or vice versa.

References: should include pertinent material and need not be encyclopedic. Twenty or 30 references suffice for the majority of manuscripts and nearly all can be presented with less than 40. Did the authors select the appropriate material to cite? Note that when the authors are claiming priority such as "the first case of ..." it is not adequate simply to say "we did a PubMed search..." Details on the depth and breadth of the literature review should be included.

Is the content in correct sections of the manuscript? For example, are discussion comments in the results section or are methods and results mixed up?

For experimental studies, is the material understandable to non-scientist readers? Is there adequate detail in the methods section that would allow someone skilled in the field to replicate the work?

Meaningful peer review is time-consuming. We are grateful for your efforts and advice. Thoughtful reviews improve papers, which in turn provide better information to readers, ultimately improving patient care and outcomes.

CASE REPORTS

Points to consider:

- The Abstract presents an accurate description of the case and its implications.
- The case covers a new or unique feature of patient management.
- The reason for reporting the case is made clear.

- The impact of the health problem on society is stated.
- An adequate literature review was conducted.
- The references support the rationale for reporting the case.
- The patient is described adequately (e.g., chief complaint, history, etc.).
- The management of the case is effectively described.
- Valid and reliable outcome measures are utilized.
- The outcome measures are suitable for the given clinical circumstances.
- The results of diagnostic tests are presented adequately.
- Normal values of less common diagnostic tests are provided.
- An accurate diagnosis is provided.
- Convincing evidence in support of the diagnosis is presented.
- The case is compared with previously reported cases and studies.
- Study limitations are reported and are reasonable.
- Alternate explanations are considered and successfully refuted.
- Suggestions for future research are proposed.
- Implications for current clinical practice are pointed out.
- Enough evidence is presented to support the author's conclusions.
- The author communicates the importance of this case to the profession.
- The conclusions are appropriate.
- Overall impression about the quality of the case report: ‰ Good ‰ Fair ‰ Poor
- Key points to consider: _____