

# American Journal of Orthodontics and Dentofacial Orthopedics

## Evaluation form for Randomized Clinical Trials

Instructions: Please mark your response with an "X" and use a red font to enter your response to each question.

### ABSTRACT

A. Does the abstract describe the following sections adequately?			
Study purpose	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Materials and methods	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Results	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Conclusions	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Additional Comments: >			

### INTRODUCTION

I-1. Does the introduction describe the following sections adequately?			
Scientific background	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Explanation of rationale	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Specific objectives or hypotheses	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
I-2. Was a systematic review cited in this section in an effort to indicate existing evidence on the subject of interest?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Additional Comments: >			

### METHODS-ASSESSMENT OF INTERNAL VALIDITY & RISK OF BIAS

M-1. Were participants ( <i>eligibility criteria, settings</i> ) clearly described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-2. Were interventions clearly ( <i>to allow replication</i> ) described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-3. Was follow-up clearly described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-4. Was follow-up similar between patient groups?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-5. Were the outcomes ( <i>primary &amp; secondary</i> ) clearly described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-6. Was the sample size clearly described and justified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-7. Was the random number generation method clearly described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-8. Was the allocation concealment clearly described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-9. Was blinding ( <i>if applicable</i> ) clearly described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-10. If blinding was not feasible when applying the interventions, were the outcome assessors blind?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-11. Are the statistical methods clearly described and justified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
M-12. Are any subgroup analyses and/or adjusted analyses clearly described & justified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Additional Comments: >			

Rs. Please indicate potential biases that might influence the results of this trial:			
<i>Random sequence generation adequate? (selection bias)</i>	<input type="checkbox"/> High	<input type="checkbox"/> Low	<input type="checkbox"/> Unclear
<i>Allocation concealment adequate? (selection bias)</i>	<input type="checkbox"/> High	<input type="checkbox"/> Low	<input type="checkbox"/> Unclear
<i>Blinding of participants and personnel? (performance bias)</i>	<input type="checkbox"/> High	<input type="checkbox"/> Low	<input type="checkbox"/> Unclear
<i>Blinding of assessors? (detection bias)</i>	<input type="checkbox"/> High	<input type="checkbox"/> Low	<input type="checkbox"/> Unclear
<i>Outcome data reported completely, accounting for all subjects? (attrition bias)</i>	<input type="checkbox"/> High	<input type="checkbox"/> Low	<input type="checkbox"/> Unclear
<i>Free of selective reporting (reporting bias)</i>	<input type="checkbox"/> High	<input type="checkbox"/> Low	<input type="checkbox"/> Unclear
<i>Free of other threats to validity</i>	<input type="checkbox"/> High	<input type="checkbox"/> Low	<input type="checkbox"/> Unclear
Additional comments regarding bias assessment: >			

## RESULTS

Re-1. Please state briefly the main trial results: >			
Re-2. Is the participant flow clearly and correctly described ( <i>flow diagram</i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Re-3. Are the dates of recruitment and follow-up clearly described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Re-4. Is the table of baseline demographic & clinical characteristics appropriately constructed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Re-5. Are there any obvious baseline imbalances that might influence the results?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Re-6. Are the participant number analyzed ( <i>w/denominators</i> ) clearly shown?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Re-7. Are effect estimates and confidence intervals clearly shown?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Re-8. Are results from subgroup analyses and/or adjusted analyses shown?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Re-9. Are the statistical methods clearly described and justified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Re-10. Any harms clearly described?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Additional Comments: >			

## DISCUSSION

D-1. Are trial limitations clearly described ( <i>consider your response in sections M &amp; Re</i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
D-2. Is the interpretation consistent with results?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
D-3. Does the interpretation balance benefits and harms ( <i>if applicable</i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
D-4. Is the interpretation given in the context of other relevant and existing evidence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
D-5. Is the generalizability of the results of this trial clearly discussed? <i>Generalizability or external validity is the applicability of the trial results in other settings and is closely related with the inclusion/exclusion criteria applied in the trial</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
Additional Comments: >			

## OTHER INFORMATION

O-1. Is the trial registered?	<input type="checkbox"/> Yes	<input type="checkbox"/> Not reported
O-2. Is the trial protocol accessible ( <i>if applicable</i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> Not reported
O-3. Are there any conflicts of interest ( <i>industry funding</i> ) clearly reported?	<input type="checkbox"/> Yes	<input type="checkbox"/> None reported
Additional Comments: >		

## CONCLUSION and MISCELLANEOUS

C-1. Are conclusions appropriate and based on the results of the trial?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
C-2. Is the research question clearly defined ( <i>section I</i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
C-3. Is the trial methodology valid ( <i>sections M &amp; Rs</i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
C-4. Are the trial results clearly described ( <i>section Re</i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
C-5. Is the meaning of the results clearly and adequately described ( <i>section D</i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
C-6. Is this RCT a contribution to the orthodontic literature?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partially
C-7. Is the writing style and grammar acceptable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Additional comments regarding conclusions and miscellaneous items: >			

Any final or overall comments regarding this submission? >

Final Recommendation:

<input type="checkbox"/> Reject	<input type="checkbox"/> Major revision	<input type="checkbox"/> Minor revision	<input type="checkbox"/> Accept after copy editing
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This form is based on information from the CONSORT guidelines<sup>1</sup> and the Cochrane Handbook<sup>2</sup>.

1. Moher D, Hopewell S, Schulz KF, Montori V, Gøtzsche PC, Devereaux PJ, et al. CONSORT 2010 Explanation and Elaboration: updated guidelines for reporting parallel group randomised trials. *BMJ* 2010;340:c869.
2. Higgins JPT, Altman DG, Sterne JAC (editors). Chapter 8: Assessing risk of bias in included studies. In: Higgins JPT, Green S (editors). *Cochrane Handbook for Systematic Reviews of Interventions Version 5.1.0 (updated March 2011)*. The Cochrane Collaboration 2011; Available from [www.cochrane-handbook.org](http://www.cochrane-handbook.org).

Do you have any suggestions to help us improve this Evaluation Form? >