Reviewer's report

Title: A systematic review of the content of critical appraisal tools

Version: 1 Date: 30 June 2004

Reviewer: Aravinthan Coomarasamy

Reviewer's report:

General

A comprehensive piece of work that has been done with a systematic approach.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

1. Why should critical appraisal checklists for "allied health" be any different to one designed for conventional medical research? Should the checklist be simply based on the research design and not the topic under investigation? Authors refer to Ref 10, but need to explain why a special focus on "allied" and how this is different.

2. My main concern is this: ANY checklist should be based on an evaluation of EMPIRICAL evidence for design-features related bias. For example, Lijmer et al have shown in the case of diagnostic accuracy studies, whether the study was retrospective or prospective does NOT matter (although many checklists have this item), but on the other hand the adequacy of description of the index test is important (although this item does not normally feature in critical appraisal checklists). Therefore, to arrive at a "gold standard" appraisal checklist, the authors should have examined which checklists based their appraisal items/questions on empirical evidence. A simple comparison of all available checklist is missing the point.

3. The authors seem to show a preference (see abstract for example) for a generic checklist - a generic checklist will serve no purpose - a checklist for appraising an RCT cannot and should never be used for qualitative research - it would place the qualitative research at the bottom of the hierarchy. Different research designs require different appraisal checklists - so the paper should lose this focus. [In fact, the authors can reject the section on the generic checklists on account of it being misleading]

4. Page 9: do they mean internal validity [most items presented relate to internal validity]

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions
Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

None