### Query Information

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| **Query ID assigned *(internal office use only)*:** | Query ID to be assigned. |
| **Commissioning organization:** | Enter Client Information. |
| **Project title:** | Enter Project Title |
| **Date prepared:** | Select date |
| **Project leader and contact information:** | Enter Contact Details |
| **Is this rapid review through COVID-END?** | Yes  No |
| **Are you a Cochrane Canada Centre?** | Yes  No |

### About the Project Team

*Highlight your team’s and your expertise in this topic area and with rapid reviews.*

*Please provide details on the team, including who the content expert and patient/citizen partners are on the team and how everyone will be involved.*

*We recommend involving* ***one content expert*** *in the area and* ***two patient/citizen partners*** *(one lead and one support) to be involved with the rapid review.* *We also encourage* ***inclusion of trainees*** *(e.g., graduate student, post-doctoral fellows, research fellows, etc.) as part of your research team, when possible.*

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### Rapid Review Type

*Please indicate what type of rapid review you are undertaking.*

*You can use the tool* [***What Review is Right For You?***](https://whatreviewisrightforyou.knowledgetranslation.net/) *to help you decide which approach would be most useful in answering the research question posed by the decision-maker(s).*

Rapid Review (using streamlined approaches to a systematic review)[[1]](#footnote-1)

Rapid Scoping Review (using streamlined approaches to a scoping review)[[2]](#footnote-2)

Rapid Overview of Reviews (using streamlined approaches to an overview of reviews)[[3]](#footnote-3)

Other variations, please specify: Click or tap here to enter text.

### Study Registration

**Topic Registration**

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| Is your rapid review on a topic related to COVID-19? | Yes  No |
| *If yes, have you registered your topic with the* [***National Collaborating Centre for Methods and Tools***](https://www.nccmt.ca/covid-19/covid-19-evidence-reviews)*?* | Yes  No  Not applicable |

**Protocol Registration**

*If your rapid review has very short timeline (5-10 business days), it is possible you did not have a chance yet to register your protocol.*

*If the protocol was registered, please indicate the registry it was submitted to.*

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|  | *Please select one.* | *Please provide the protocol ID.* |
| [**PROSPERO**](https://www.crd.york.ac.uk/prospero/)  PROSPERO is an international prospective register that accepts protocol for systemic reviews, **rapid reviews**, and umbrella reviews in health and social care, welfare, public health, education, crime, justice, and international development, where there is a health related outcome. |  |  |
| [**OSF Registries**](https://osf.io/registries)  Open Science Framework is a free, open platform to support research and enable collaboration. |  |  |
| Other | Please specify: Click or tap here to enter text. |  |

If the protocol has note been registered, but you plan to do so in the future, please indicate anticipated submission date and platform here.

***Enter N/A if not applicable (e.g., rapid review must be completed within 5-10 business days).***

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### Literature Search

*There are several things to consider when developing a search strategy. Always work with an experienced librarian in developing your search strategy. We recommend prioritizing specificity over sensitivity.*

*CADTH’s information specialists have developed and peer-reviewed a set of* [*search strings for topics related to COVID-19*](https://covid.cadth.ca/literature-searching-tools/cadth-covid-19-search-strings/)*.**[[4]](#footnote-4)*

**What search limitations are you employing, if any?**

* *Limiting by publication date (e.g., last year, last 10 years, last 15 years).*
* *Limiting by publication language (note: we encourage all languages for COVID-19 or other global conditions, unless the knowledge user suggests otherwise).*
* *Limiting by study types (e.g., primary studies, reviews, guidelines).*

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**Which bibliographic databases will you be searching?**

*We recommend at least MEDLINE/PubMed and EMBASE – also Cochrane if feasible.*

*Additionally, search COVID-19 specific databases such as* [*COVID-19 L•OVE*](https://app.iloveevidence.com/loves/5e6fdb9669c00e4ac072701d)*,* [*LitCovid*](https://www.ncbi.nlm.nih.gov/research/coronavirus/)*,* [*WHO Global Literature on COVID-19*](https://search.bvsalud.org/global-literature-on-novel-coronavirus-2019-ncov/)*, and* [*McMaster PLUS*](https://plus.mcmaster.ca/COVID-19/)*.*

*\*\*\*Please describe any sex and gender or additional equity considerations (e.g., age, income, ethnocultural backgrounds, Indigenous status, languages spoken, geographic location, ability/disability) to developing the search strategy and selecting databases.* *[[5]](#footnote-5)*

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**Which grey literature sources will you be searching?**

*We recommend searching at least a trial registry, such as the* [*International Clinical Trials Registry Platform (ICTRP)*](https://www.who.int/clinical-trials-registry-platform/the-ictrp-search-portal)*, a COVID-19 resource, such as the* [*McMaster Health Forum*](https://www.mcmasterforum.org/networks/covid-end)*, and a pre-print server, such as* [*medRxiv*](https://www.medrxiv.org/)*.*

CADTH has also published a curated list of [COVID-19 grey literature sources](https://covid.cadth.ca/literature-searching-tools/cadth-covid-19-grey-literature-resources/).[[6]](#footnote-6)

*\*\*\*Please describe any sex and gender or additional equity considerations to selecting grey literature sources**.*5

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**Literature Search Date**

Please select your latest literature search date: Click or tap to enter a date.

### Study Selection Approach

*Always use standardized screening forms for both title and abstract screening and full-text screening.*

*To calibrate the screening forms, a pilot exercise must be completed by all reviewers and the lead scientist.*

*Consider whether screening will be done in duplicate, OR one reviewer screens and a second reviewer screens excluded studies, OR only one reviewer screens following calibration exercise.*

*Other novel approaches can include machine learning/semi-automation approaches.*

*\*\*\*Please describe any sex and gender or additional equity considerations related to the eligibility criteria, and specifically, selection of outcomes.*5

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### Data Extraction Approach

*Always use a standardize data extraction form and perform a pilot exercise to calibrate and test the form with all reviewers and the lead scientist.*

*Consider whether data extraction will be done in duplicate OR one reviewer will extract and a second reviewer will verify key data elements or all data elements.*

*Other novel approach can include machine learning and text-mining tools.*

*To save time, parallelization of tasks can also be planned (e.g., screening and data abstraction occur simultaneously).*

*\*\*\*Please describe any sex and gender or additional equity considerations to data collection, such as abstraction of equity-focused outcomes.*5

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### Risk of Bias Assessment Approach

*This step is not applicable if conducting a rapid scoping review.*

*Always use a validated risk of bias tool for the included study design.*

*Consider whether risk of bias assessment will be done in duplicate OR one reviewer to rate risk of bias and a second reviewer to verify.*

*Unless the team is experienced with the risk of bias tools, a pilot exercise should be done with all reviewers and the lead scientist.*

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### Synthesis Approach

*Limit to basic descriptive summary of studies.*

*We recommend keeping the report very high-level.*

*One strategy is to send preliminary results and ask for a deep-dive on key issues from knowledge users.*

*Use summary tables.*

*Interpretation of results needs to carefully consider any streamlined methods used.*

*Be specific and transparent about what might have been lost in process and what needs to be addressed in future.*

*Comment on whether a more comprehensive (systematic) review should be completed and when such a review should be done.*

*Work closely with your knowledge user to interpret results will ensure that end-product is relevant and fit-for-purpose.*

*\*\*\*Please describe any sex and gender or additional equity considerations to data synthesis and interpretation.*5

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### Knowledge User Engagement Plan

*Describe how you plan to engage the immediate knowledge user (i.e., commissioning organization) throughout the project phase (inception to completion).*

*We recommend weekly updates for rapid reviews at a minimum using the template in the* [*Appendix*](#_APPENDIX)*.*

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#### Frequency of knowledge user update

Please include frequency of progress updates you will provide to the knowledge users (e.g., weekly updates). *Please see the KU update template provided.*

Please select one from the dropdown menu.

### Patient and Citizen Partner Engagement Plan

*We encourage each review to include two patient/citizen partners (one lead and one support) on each rapid review. If you have pre-existing relationships with relevant patients/citizens, then feel free to include them and if not, we are happy to match you with patient/citizen partners who have the relevant lived experience for the review topic.*

*Patient/citizen partner contributions are recognized through our* [***Patient Partner Appreciation Policy***](https://sporevidencealliance.ca/wp-content/uploads/2020/10/SPOR-EA_Patient-Partner-Appreciation-Policy-and-Procedure_2020.pdf) *and are invited as coauthors on the report if they participate in multiple steps.*

*We recommend patient/citizen partners are engaged in the following steps of the review process, at a minimum:*

1. *Protocol stage (in particular in the selection of outcomes relevant to patients/citizens)*
2. *Co-production of one key message for patients/citizens at the results stage*
3. *Co-production of a plain language summary after the review has been submitted to the knowledge user.*

*Communication with patient/citizen partners is of outmost importance and we recommend letting them know they have 1 hour to review the protocol (and it must be done within 24 hours), 1 hour to review the results and 1 hour to provide a patient-relevant key message (done within 24 hours) and 5 hours to co-produce the plain language summary (to be done two weeks after the report has been submitted to the knowledge user).*

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### Dissemination or Implementation Plan

Describe your dissemination goals and how you plan to achieve these goals. Provide as much detail as possible.

* *Identify your target audiences (knowledge users).*
* *Products or tools to be disseminated.*
* *Your plan for dissemination.*
* *How you anticipate the products or tools to be used.*
* *We recommend a 1-page summary tailored to your knowledge user.*
* *Consider alternate mediums to spread your message (e.g., Twitter, YouTube, LinkedIn).*
* *We recommend publishing your findings with a pre-print server (e.g.,* [*https://www.medrxiv.org/*](https://www.medrxiv.org/)*).*

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### Declaration of Conflict of Interest

A conflict of interest (COI) occurs when personal, occupational, professional, intellectual or financial interests, either directly or indirectly, affect or appear to affect the objectivity of an Evidence Alliance member. A COI can be *real, potential, or perceived* in nature.**[[7]](#footnote-7)**

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| A ***real COI*** arises when a member has a bias, or a personal, occupational, professional or financial relationship(s) or interests that may affect or compromise, or appear to affect or compromise their work with the Evidence Alliance or with the specific project. |
| A ***potential COI*** arises when a member does not currently have a real COI but can foresee that their private, personal, or professional relationship(s) or interests may have the potential to influence their work with the Evidence Alliance (or with a specific project) in the future. |
| A ***perceived (or apparent) COI*** may exist when a reasonable, well-informed person believes that an Evidence Alliance member has a real or potential COI even though there is neither a real nor a potential conflict. |

***Refer to our COI policy found*** [***here***](https://sporevidencealliance.ca/wp-content/uploads/2020/10/SPOR-EA_COI-Disclosure-Policy_Final_2020.pdf) ***to declare any potential conflicts of interest****.*

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### Completion of Intersectionality Reflection

*Please enter the date of completion of the reflective intersectionality exercise included in your package.*

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### Timeline with descriptive milestones

*COVID-END reviews must be completed within 5-10 business days.*

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| **Key Milestones** | **Timeline** |
| Topic Refinement |  |
| Protocol Development |  |
| Literature Strategy Refinement |  |
| Literature Search |  |
| Title and Abstract Screening |  |
| Full-Text Screening |  |
| Data Extraction and Risk of Bias Assessment |  |
| Data Synthesis |  |
| Report Writing |  |
| Dissemination |  |

### Budget

*Note: The maximum allowable budget is $25,000 CAD. Depending on the project scope, the budget can range between $15,000CAD and $25,000CAD.*

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| *(See excel template)* |

### Other

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# APPENDIX

**Update date**: **Click here to enter a date.**

## Progress Update

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## Next Steps

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## Upcoming Meeting(s) and Milestone(s)

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1. For methods use [WHO Guide for Rapid Review](https://www.who.int/alliance-hpsr/resources/publications/rapid-review-guide/en/); for reporting use [PRISMA 2020 Statement](https://osf.io/preprints/metaarxiv/v7gm2/). [↑](#footnote-ref-1)
2. For methods use [WHO Guide for Rapid Review](https://www.who.int/alliance-hpsr/resources/publications/rapid-review-guide/en/), and [Updated JBI Manual](https://doi.org/10.46658/JBIMES-20-12); for reporting use [PRISMA-ScR Statement](http://www.prisma-statement.org/Extensions/ScopingReviews). [↑](#footnote-ref-2)
3. For methods use [WHO Guide for Rapid Review](https://www.who.int/alliance-hpsr/resources/publications/rapid-review-guide/en/), and [Cochrane Handbook](https://training.cochrane.org/handbook/current/chapter-v); for reporting use [PRISMA 2020 Statement](https://osf.io/preprints/metaarxiv/v7gm2/). [↑](#footnote-ref-3)
4. CADTH COVID-19 Search Strings. Available from <https://covid.cadth.ca/literature-searching-tools/cadth-covid-19-search-strings/> [↑](#footnote-ref-4)
5. Heidari S, Babor TF, De Castro P, Tort S, Curno M. Sex and Gender Equity in Research: rationale for the SAGER guidelines and recommended use. Res Integr Peer Rev. 2016 May 3;1:2. [doi: 10.1186/s41073-016-0007-6](https://researchintegrityjournal.biomedcentral.com/articles/10.1186/s41073-016-0007-6). [↑](#footnote-ref-5)
6. CADTH COVID-19 Grey Literature Resources. A Curated List of Evidence-Based Sources for Health Professionals, Librarians, and Researchers. Ottawa: CADTH; 2020 October. Available from <https://covid.cadth.ca/literature-searching-tools/cadth-covid-19-grey-literature-resources/> [↑](#footnote-ref-6)
7. <https://www.cadth.ca/about-cadth/how-are-we-doing/conflict-interest> [↑](#footnote-ref-7)