

Appendix B. Table 2. Risk of Bias Assessment Form for RCTs

Author _____ Year _____ PMID _____ Reviewer _____

Question	Response	Criteria	Justification
Internal Validity			
1. Was the method of randomization adequate?	Yes <input type="checkbox"/>	Method used should produce comparable groups.	
	No <input type="checkbox"/>	Pseudo randomization (ie. alternate allocation, by days of week, etc) or randomization approach cannot be determined	
	Uncertain <input type="checkbox"/>	Randomization method unclear	
2. Was allocation concealment adequate?	Yes <input type="checkbox"/>	Method used to conceal the allocation sequence could not have been foreseen in advance of, or during, enrolment.	
	No <input type="checkbox"/>	No concealment	
	Uncertain <input type="checkbox"/>	Could not be ascertained.	
3. Were outcome assessors blinded?	Yes <input type="checkbox"/>	Yes	
	No <input type="checkbox"/>	No	
	Uncertain <input type="checkbox"/>	Could not be ascertained.	
4a. Is the level of detail in describing the treatment intervention adequate?	Yes <input type="checkbox"/>	Treatment intervention described based upon model or theory, specific intervention components adequately described, interventions documented in manuals or other documentation.	
	Partially <input type="checkbox"/>	Some of the above features.	
	No <input type="checkbox"/>	None of the above features.	
4b. Is the level of detail in describing the control intervention adequate?	Yes <input type="checkbox"/>	Active control intervention described based upon model or theory, specific intervention components adequately described, interventions documented in manuals or other documentation. Passive control adequately described.	
	Partially <input type="checkbox"/>	Some of the above features.	
	No <input type="checkbox"/>	None of the above features.	

5. Are interventions assessed using valid and reliable measures, implemented consistently across all study participants?	Yes <input type="checkbox"/>	Implementation accompanied by staff training and fidelity checks, consistency across groups in treatment features not studied.	
	Partially <input type="checkbox"/>	Implementation accompanied by some of above features.	
	No <input type="checkbox"/>	No training or fidelity checks.	
6. Are outcomes assessed using valid and reliable measures, implemented consistently across all study participants?	Yes <input type="checkbox"/>	Measure valid and reliable (i.e. objective measures, well validated scale, provider report)	
	Partially <input type="checkbox"/>	Some of the above features (partially validated scale)	
	No <input type="checkbox"/>	None of the above features. (self-report, scales with lower validity, reliability)	
7. Were incomplete outcome data adequately addressed?	Yes <input type="checkbox"/>	Balanced across groups and/or imputed using appropriate methods.	
	No <input type="checkbox"/>	High attrition or differential loss; no imputations or inappropriate imputations for missing data.	
	Uncertain <input type="checkbox"/>	Could not be ascertained.	
8. Are reports of the study free of suggestion of selective outcome reporting?	Yes <input type="checkbox"/>	All prespecified outcomes reported.	
	No <input type="checkbox"/>	Not all prespecified outcomes reported, subscales reported not prespecified, outcomes reported incompletely.	
	Uncertain <input type="checkbox"/>	Could not be ascertained.	
9. Is the study free from additional sources of bias?	Yes <input type="checkbox"/>		
	No <input type="checkbox"/>		
	Uncertain <input type="checkbox"/>		
	Overall Assessment		
Overall Risk of Bias assessment	Low <input type="checkbox"/>	Results are believable taking study limitations into consideration	
	Moderate <input type="checkbox"/>	Results are probably believable taking study limitations into consideration	
	High <input type="checkbox"/>	Results are uncertain taking study limitations into consideration	