Appendix B. Table 3. Risk of B	ias Assessme	nt Form for Observat	ional Studies	
Author	Year	PMID	Reviewer	

Question	Response	Criteria	Justification
		Internal Validity	
1. Is the study design prospective, retrospective, or mixed?	Prospective	Outcome has not occurred at the time the study is initiated and information is collected over time to assess relationships with the outcome.	
	Mixed	Case-control or cohort studies in which one group is studied prospectively and the other retrospectively.	
	Retrospective	Analyzes data from past records.	
2a. Are inclusion/exclusion criteria clearly stated (i.e.,	Yes		
severity, time since injury, pre- existing conditions,	Partially	Some, but not all, criteria stated or some not clearly stated.	
comorbidities, prior tbi)	No		
2b. TBI severity inclusion criteria measured using valid	Yes	e.g., GCS<13; LOC> 30 minutes; AOC >24 hours; PTA>1 day; AISS>2; positive imaging	
and reliable measures and	No		
appropriate cut points for mod/sev TBI?	Uncertain	Could not be ascertained.	
2c. Did the study apply inclusion/exclusion criteria	Yes		
uniformly to all comparison groups of the study?	Partially	Some criteria applied to all arms	
	No		
2d. Is the selection of the comparison group appropriate, after taking into consideration feasibility and ethical considerations?	Yes	Groups selected from same source (e.g., community or hospital) to reduce baseline differences between groups. For case-control studies, cases should have met case definition if they had the outcome.	
	No		
	Uncertain	Could not be ascertained.	

3. Were outcome assessors blinded?	Yes		Yes	
	No		No	
	Uncertain		Could not be ascertained.	
4a. Is the level of detail in describing the treatment intervention adequate?	Yes		Treatment intervention described based upon model or theory, specific intervention components adequately described, interventions documented in manuals or other documentation.	
	Partially		Some of the above features.	
	No		None of the above features.	
4b. Is the level of detail in describing the control intervention adequate?	Yes		Intervention described based upon model or theory, specific intervention components adequately described, interventions documented in manuals or other documentation.	
	Partially		Some of the above features.	
	No		None of the above features.	
5. Are interventions assessed using valid and reliable measures, implemented consistently across all study	Yes		Implementation accompanied by staff training and supervision, checks of adherence/fidelity; consistency across groups in treatment features not studied.	
participants?	Partially		Implementation accompanied by some of above features.	
	No		Implementation accompanied by none of above features.	
6. Are outcomes assessed using valid and reliable measures, implemented consistently across all study	Yes		Measure valid and reliable (i.e. objective measures, well validated scale, provider report); consistent implementation across groups.	
participants?	Partially		Some of the above features (partially validated scale)	
	No		None of the above features. (self-report, scales with lower validity, reliability); in consistent implementation across groups	
	Uncertain	П	Could not be ascertained.	

7a. Was attrition from all groups less than 20 percent?	Yes		
	No		
	Uncertain	Could not be ascertained (i.e. retrospective designs where eligible at baseline could not be determined)	
7b. Did attrition differ between groups by less than 20 percent?	Yes		
	No		
	Uncertain	Could not be ascertained (i.e. retrospective designs where eligible at baseline could not be determined)	
7c. In cases of high attrition or differential attrition, is the	Yes		
impact assessed (e.g. through sensitivity analysis or other	No		
adjustment method)?	Uncertain	Could not be ascertained (i.e. retrospective designs where eligible at baseline could not be determined)	
	NA	Not considered high or case-control study	
8. Were the important confounding and effect	Yes		
modifying variables taken into account in the design and/or	Partially	Some variables taken into account or adjustment achieved to some extent	
analysis (e.g. through matching,	No	Not accounted for or not identified.	
stratification, interaction terms, multivariate analysis, or other statistical adjustment)?	Uncertain	Could not be ascertained	
9. Are the statistical methods used to assess the primary outcomes appropriate to the data?	Yes	Statistical techniques used must be appropriate to the data and take into account issues such as controlling for dose-response, small sample size, clustering, rare outcomes, and multiple comparisons. In normally distributed data the standard error, standard deviation, or confidence intervals should be reported. In nonnormally distributed data, inter-quartile range should be reported.	

	Partially			
	No			
	Uncertain		Could not be ascertained	
10. Are reports of the study free of suggestion of selective	Yes			
outcome reporting?	No		Not all prespecified outcomes reported, subscales not prespecified reported, outcomes reported incompletely.	
	Uncertain		Could not be ascertained.	
11. Is the study free from additional sources of bias?	Yes			
	No			
	Uncertain			
		0		
Overall Risk of Bias assessment	Low		Results are believable taking study limitations into consideration	
	Moderate		Results are probably believable taking study limitations into consideration	
	High		Results are uncertain taking study limitations into consideration	