

## Reviewer Rubric for Clinical and Translational Gastroenterology

All reviews are scored using a rubric as described in the Instructions for Reviewers. [NOTE: instructions for reviewers should be a hyperlink] Those reviews scoring 70 points and higher (out of a possible 100 points) make the reviewer eligible for CME credit.

Reviews returned by the assigned deadline earn 20 points. Reviews returned within 7 days post-deadline earn 10 points while those returned beyond 7 days earn 5 points.

Please be sure your review includes a discussion of:

1. Originality and/or Relevance to the field (worth 20 points)
2. Strengths of the paper (worth 20 points)
3. Weaknesses of the paper (worth 20 points)
4. Constructive/thoughtful suggestions to improve the manuscript (worth 20 points)

**Table 1. Reviewer Rubric for Clinical and Translational Gastroenterology**

Quality of Review	Maximum points earned
Originality and/or Relevance to the field	20
Strengths of the paper	20
Weaknesses of the paper	20
Constructive/thoughtful suggestions to improve the manuscript	20
Timeliness of Review	
Met deadline	20
≤7 days past deadline	10 (i.e. partial credit)
>7 days past deadline	5 (i.e. less partial credit)
<b>Total possible points (Quality of Review + Timeliness of Review)</b>	<b>100</b>

### Suggestions for Reviewers:

Start with a **brief** summary of the paper, including the key findings

Place the paper in context of what is already known

Include a list of the study's strengths

Include a list of the study's major weaknesses

Describe any significant flaws and whether and how they might be remedied

Have similar studies already been published that more effectively answers the questions raised in this paper?

Have the authors cited key relevant sources that would contradict their findings and did they address it either through novel methodology or in their discussion?

If major revisions are required, clarify in a respectful manner how you think that would best be accomplished

Are there any major problems in how the work is presented? Is the language clear and do all the figures & tables provide necessary data?

Are there any ethical issues such as lack of oversight by an institutional review board or failure to register prospective randomized trials in a clinical trial registry?

If there are minor weaknesses, list those in a separate section

Are there any numerical or unit errors you can highlight?

Are there some ambiguous phrases you could not understand?

Are all the tables and figures necessary and correctly labelled?

You do not need to highlight errors in spelling and minor grammatical issues as these will be addressed by journal staff

## Examples of reviews and how they would be scored using the CTG rubric

### Example #1: Returned 11 days after due date

*In this observational study, 99 patients with eosinophilic esophagitis (EOE) as well as 40 control subjects were enrolled. The authors report differences in rutabaga consumption between EOE patients and controls as well as between subgroups based on history of proton pump inhibitor use*

*I am very worried about the composition of the control group. It is not only very small but also differs with respect to age, sex, and prior treatment status compared to EOE patients. Therefore, it is impossible to say whether differences in rutabaga consumption between EOE patients and controls are due to EOE or some of these covariates. The authors may consider recruiting more control patients in order to achieve a comparable control group.*

*One minor point, you should correct the spelling of "esofogus" to "esophagus" on page 5, paragraph 3.*

### Review score according to the rubric: 25 points (no CME credit awarded):

Originality and/or Relevance to the field (worth 20 points) = 0 points awarded

Rationale for scoring: There is no mention of other studies or how this clinical entity has been previously addressed. There is no clinical context provided or discussion of originality.

Strengths of the paper (worth 20 points) = 0 points awarded

Rationale for scoring: There are no strengths mentioned. Nearly every study has some strengths. It is helpful to the editors to highlight these to balance critical comments and aid in determining a manuscript's overall potential impact on the field.

Weaknesses of the paper (worth 20 points) = 10 points awarded

Rationale for scoring: The small number of subjects is discussed as is the imbalance between the cases and controls. A more detailed discussion of other weaknesses (see Example #2) could have been provided.

Constructive/thoughtful suggestions to improve the manuscript (worth 20 points) = 10 points awarded

Rationale for scoring: The reviewer has offered a suggestion for how to improve the study, namely the enrollment of additional control subjects. Other suggestions for improvement could have been offered (see Example #2). Spelling errors and other minor formatting changes are managed by the journal and do not need to be highlighted by reviewers.

Timeliness (worth 20 points) = 5 points awarded

Rationale for scoring: The review was returned more than 7 days post-deadline.

## Example #2: Returned one day after it was due

*This is a single-center, retrospective cohort study looking at rutabaga consumption in patients with eosinophilic esophagitis (EOE) and controls. EOE is a complex allergen/inflammatory condition that often impairs swallowing. Previous studies of this disease have been exclusively focused on non-root vegetables, making this study a potentially important addition to the literature. Moreover, the subject population was racially and ethnically diverse with a good balance of the sexes and ages, an important step in ensuring broad applicability of results. The investigators relied on well-defined and objective primary and secondary endpoints and used commercially available assays with high documented accuracy. Despite these strengths, I have some concerns that should be addressed as follows:*

*Major concerns:*

- 1) The study is underpowered to draw meaningful conclusions. A formal power calculation should be included, though this will likely demonstrate a need for significantly more subjects.*
- 2) There is an imbalance between the cases and controls in several key confounding variables such as age and sex. Perhaps the authors could include a larger number of subjects. If possible, a collaboration with researchers at additional sites would help with this while improving generalizability.*
- 3) There is no mention of statistical corrections for multiple comparisons. Not including the baseline demographics comparison, I count 22 t-tests between cases and controls, at least 10 logistic regressions for predictors, 22 correlations with hangnail status for controls, 14 non-linear regression models for pruritus pancreas severity, and 12 ANOVAs for astrological signs. Application of a Bonferroni correction (or some other appropriate correction) should be considered.*

*ADDITIONAL MAJOR CONCERNS REMOVED TO SIMPLIFY THE EXAMPLE*

*Minor concern:*

*Table 3 is duplicative with the text and may not be necessary*

## Review score according to the rubric: 90 points (CME credit awarded):

Originality and/or Relevance to the field (worth 20 points) = 20 points awarded

Rationale for scoring: comments included that address the originality of the study as well as why this may be relevant to the field of EOE.

Strengths of the paper (worth 20 points) = 20 points awarded

Rationale for scoring: There are several strengths mentioned that highlight thoughtfulness of design by the authors.

Weaknesses of the paper (worth 20 points) = 20 points awarded

Rationale for scoring: Several weaknesses were highlighted, but more importantly, these were provided in a respectful manner with suggestions for how to overcome these weaknesses when feasible.

Constructive/thoughtful suggestions to improve the manuscript (worth 20 points) = 20 points awarded

Rationale for scoring: The reviewer has offered a number of suggestions for how to improve the study.

Timeliness (worth 20 points) = 10 points awarded

Rationale for scoring: The review was returned within 7 days post-deadline (it would have received 20 points if returned one day earlier on the date it was due).