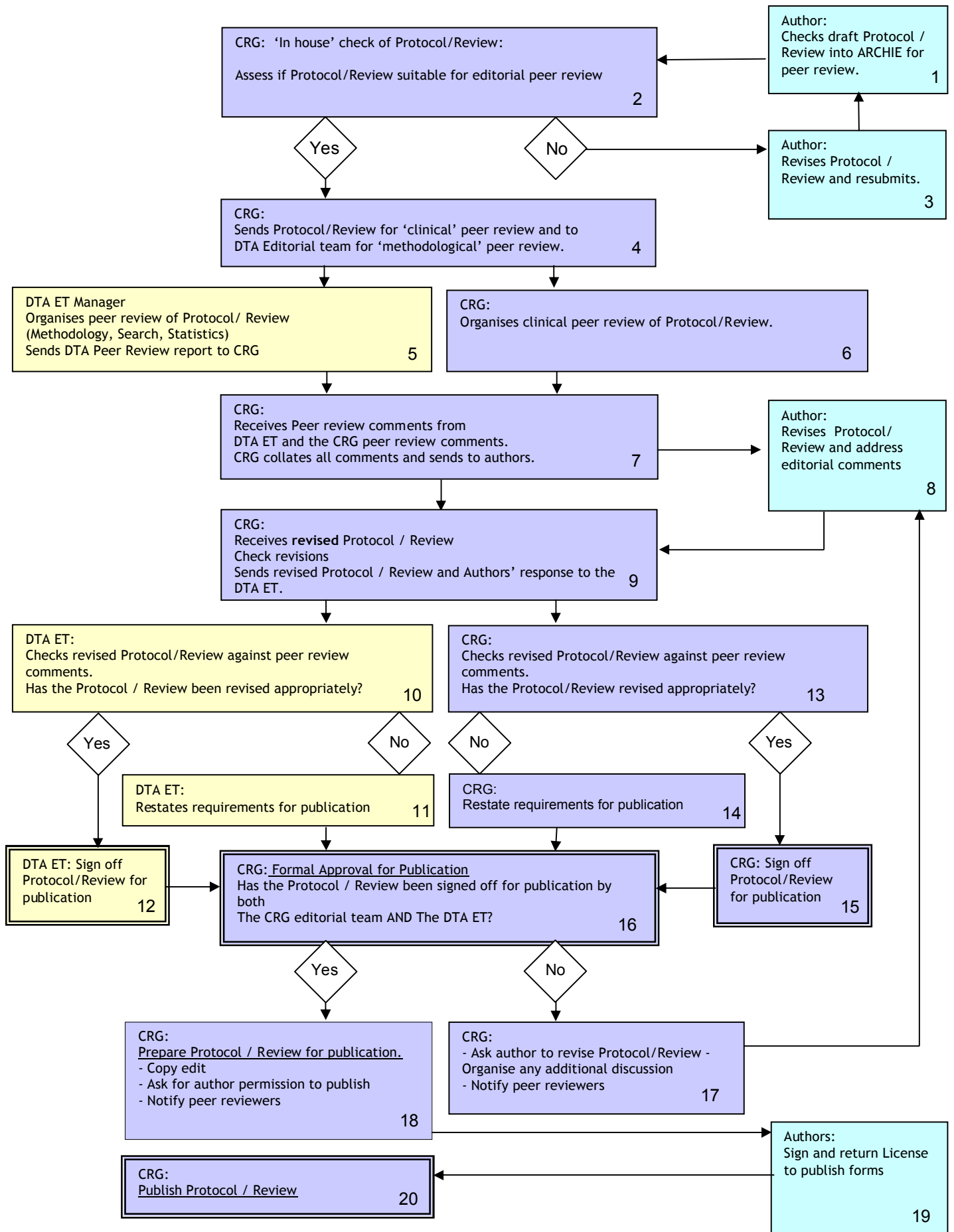


## Editorial process for publishing DTA systematic reviews and protocols



## CRG Flow chart for Peer review of DTA systematic reviews

**1 Author checks review into Archie and notifies CRG it is ready for peer review**

**2 CRG Receives Protocol/Review makes 'In-house' check of Protocol/Review**

CRG Team (RGC, TSC, Editors) assesses if Protocol/Review is suitable for editorial peer review. Checks might include RevMan validity check, a check of the search strategy, assessment of clinical relevance etc.

**If No - Protocol/Review is not suitable for peer review**

**3 CRG Returns Protocol/Review to Authors / Authors make changes to Protocol/Review**

RGC sends the authors some guidance on changes needed to bring the Protocol/Review to the standard suitable for peer review. [Return to step 1].

**If Yes Protocol/Review is suitable for peer review**

**4 CRG sends Protocol/Review for peer review**

RGC makes the Protocol/Review available for peer review to clinical peer reviewers (peer review as defined by the individual CRG) and to the DTA Editorial Team Manager to begin the process of peer review of methods. [on to Step 5]

**5 DTA ET Manager sends the Protocol/Review for Peer Review**

The Protocol/Review is assigned to a DTA ET Contact Editor and is sent for peer review to a Statistician, an Information scientist and a DTA methodologist. The peer reviewers prepare reports for the DTA Contact Editor. The DTA Contact Editor prepares a summary report for the CRG and Authors providing advice, if needed, on how the Protocol/Review needs to be changed in order to meet the standards expected from a Cochrane Review. The Report contains a decision that the review is acceptable with

- minor revisions,
- acceptable with revisions or that
- major revision is needed (possibly with additional peer review).

**6 The RGC sends the Protocol/Review out for Peer Review**

Peer Review for clinical aspects is individual to each CRG. The Peer reviewers return comments to the RGC

**7 CRG prepares report for Authors**

The CRG receives peer review comments from the DTA ET peer review and the clinical (CRG) peer review. The CRG may contact the DTA ET Contact Editor for clarification of items within the Peer Review Report. The CRG sends the reports to the Authors. Authors are asked to revise the Protocol/Review as described by the Peer Review Report. And to prepare an 'Authors' response' document in which the authors respond to each of the Peer Reviewers comments.

**8 Authors return revised Protocol/Review to the CRG**

The Authors revise their Protocol/Review to incorporate the comments and advice from the peer review process. Authors are asked to respond to each of the peer reviewers numbered comments in a separate document that can be returned to the DTA ET. If the authors disagree with any of the points in the DTA ET Peer Review reports these can be included in the

point-by-point response. The DTA ET are happy to provide clarification of any points in the peer review report. Authors make revised Protocol/Review available to the CRG and send an 'Authors' response' document to the CRG.

#### **9 CRG receives revised Protocol/Review**

CRG Makes the revised Protocol/Review and the Authors' response document available to the DTA ET Manager and to the CRG Editor to check revisions made are appropriate.

#### **10 DTA ET Checks revised Protocol/Review**

The DTA ET receives the Revised Protocol/Review and 'Authors' response' document and checks if the revised Protocol/Review has taken into account all of the Peer review comments and has been revised appropriately.

##### **If No - Not revised appropriately**

###### **11 DTA ET Returns Protocol/Review to CRG for further revision**

The DTA ET notifies the CRG that the Protocol/Review needs more changes or the authors need more guidance in how to meet the CRG standards for publication of a Cochrane DTA Protocol/Review [Step 16].

##### **If Yes - Revisions acceptable**

###### **12 DTA ET Manager notifies CRG that the Protocol/Review is considered suitable for publication**

The Protocol/Review may require additional technical and copy editing before publication [Step 16].

#### **13 CRG checks if revisions are made appropriate**

##### **If No - Not revised appropriately**

###### **14 The CRG identify the remaining items required for preparation**

The Protocol/Review needs more changes or the authors need more guidance in how to meet the CRG standards for publication of a Cochrane DTA Protocol/Review [Step 16].

##### **If Yes - Revisions acceptable**

###### **15 CRG notifies DTA ET that the Protocol/Review is considered suitable for publication**

The Protocol/Review may require additional technical and copy editing before publication [Step 16].

#### **16 CRG checks that both the DTA ET and the CRG editors have both agreed the Protocol/Review is suitable for publication**

##### **If No DTA ET or CRG, or Both, has not approved the Protocol/Review for publication**

###### **17 CRG contact the author to ask for further revision**

CRG asks the authors to revise and resubmit the review. Providing a list of further changes required and any requirements about providing detailed responses to comments. If necessary the CRG provide the authors with more guidance on how to meet the standards for publication of a Cochrane DTA Protocol/Review. CRG organize any additional discussion between DTA ET and CRG editors and authors [Return to step 8].

**If Yes - Both have approved the Protocol/Review for publication**

**18 CRG prepares Protocol/Review for publication**

The Protocol/Review meets the standards required by the CRG for publication of a Cochrane DTA Protocol/Review. NB there may need to be additional copyediting and technical editing. CRG ask authors to sign a License to publish form [step 19 and 20].

**19 Authors sign and return license to publish forms to the CRG**

**20 CRG Publish Protocol/Review**