



Work Plan for a Systematic Review of the Literature

Please complete this form before meeting with a librarian.

Lead investigator:

Name:

Dept:

Status:

Email:

Room:

Telephone:

Are you working with MUHC attending staff?

Yes

No

Name:

Dept:

MUHC site:

Email:

Room:

Telephone:

Is this project for your Thesis/Dissertation?

Yes

No

Systematic Review (SR) Topic

Briefly describe your SR.

Research Objectives

Provide a precise statement of the primary objective of your SR, ideally in a single sentence. For example: 'To assess the effects of [intervention or comparison] for [health problem] in [types of people, disease or problem and setting if specified]'. This might be followed by one or more secondary objectives.

Have you prepared a [protocol](#) for your SR?

Yes

No

If you answered "Yes" please bring it with you when you meet with a librarian.

Is your protocol registered on [PROSPERO](#)?

Yes

No

If you answered "Yes" please provide the protocol registration number:

Has a SR ever been done on your topic?

Yes

No

Unsure/Didn't check

Provide citations (or the DOI or PMID) for relevant SR or literature reviews. Please bring papers, if you have them.

1.

2.

Have you already found relevant research articles on your topic?

Yes

No

Provide citations (or the DOI or PMID) for relevant articles. Please bring papers, if you have them.

1.

2.

3.

PICO Frame

Identify your key concepts and provide synonyms.

Some SR questions may not fit exactly in the PICO frame and not all components may be relevant to your question.

Population	
Intervention	
Comparison	
Outcomes	

Additional comments?

Inclusion/Exclusion Criteria

Population:

Humans/Animals: all
 Human studies only
 Other:

Gender: both
 male
 female

Age: all
 under
 over
 between -

Race/Ethnicity:

Languages: language restrictions are not recommended.

English only? No, all languages
 No, also include:
 Yes

Publication Years: date restrictions should be applied only when appropriate (e.g. when a drug treatment is only available after a certain date).

Years: all
 before
 after
 between -

Limits: select which types of study you would like to limit your results to.

<input type="checkbox"/> Randomized Controlled Trials	<input type="checkbox"/> Case Series/Case reports
<input type="checkbox"/> Controlled Trials	<input type="checkbox"/> Prospective/Longitudinal/Follow-up Studies
<input type="checkbox"/> Cohort Studies	<input type="checkbox"/> Cost-Benefit Analyses
<input type="checkbox"/> Case-Control Studies	<input type="checkbox"/> Qualitative Research
<input type="checkbox"/> Cross-Sectional (prevalence) Studies	<input type="checkbox"/> Other:

Apart from research articles, would you like to include the following publication types?

Dissertations/Theses:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Newspapers/trade journals:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Books/ book chapters:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Research in progress:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Conference abstracts:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Reviews	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Editorials/letters/comments:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	SRs or Meta-Analyses	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other:					

Reserved for internal use by MUHC Library staff

Date Received:

Lead Librarian:

First meeting date:

Project name: