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**Knowledge Summary Submission Template**

Thank you for your interest in writing and submitting a Knowledge Summary to *Veterinary Evidence*.

**Getting started**

Before writing or submitting your Knowledge Summary, please contact the [Editorial Office](https://veterinaryevidence.org/index.php/ve/about/contact) with your [proposed Knowledge Summary PICO question](https://veterinaryevidence.org/index.php/ve/Five-steps). This step is essential to ensure:

1. The PICO is specific enough so that it can be addressed as a Knowledge Summary rather than a review paper.
2. The question has been translated into an acceptable PICO format.
3. The PICO is of importance to the veterinary community.
4. The proposed Knowledge Summary has not been previously answered, is not in preparation and has not been submitted for consideration for publication.

**Author guidance**

* Read our [Five Steps to Writing a Knowledge Summary](https://veterinaryevidence.org/index.php/ve/Five-steps).
* Visit our [Author Hub](https://veterinaryevidence.org/index.php/ve/author-hub) and [Editorial Policy](https://veterinaryevidence.org/index.php/ve/editorial-policies) pages for more information on writing and submitting your paper.
* Always download the latest version of this template for each new submission, as updates may have been made.
* If you have any questions during the writing or submission process, contact the Editorial Office.
* Are you an undergraduate student? You may be able to submit to the [*Veterinary Evidence* Student Awards](https://veterinaryevidence.org/index.php/ve/veterinary-evidence-student-award).
* **Word count:** Clinical Scenario: 100 words, Evidence: 200 words, Summary of the Evidence: 700 words (per paper appraised), Appraisal, Application and Reflection section: 1000 words.
* Once you’ve submitted, please check your spam folder for updates, as some universities and organisations may block our emails due to their filters.

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| **Submission Guidelines** |

**Purpose of a Knowledge Summary**

A Knowledge Summary is a practical, time-saving tool to assist veterinary professionals in making evidence-based decisions. The writing should be clear, objective, and concise.

**Balanced Appraisal**

A Knowledge Summary should provide a balanced assessment of the strength of evidence provided by the study designs described in the paper(s) to support the outcomes reported. Critical appraisal is not simply a negative critique; rather, it should offer an objective evaluation that acknowledges both strengths and limitations of the studies reviewed.

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| **Knowledge Summary submission**  |

**Title of your Knowledge Summary**

A well-crafted title enhances the discoverability of your paper. Your title should:

* Be 15 words or fewer.
* Present the overarching clinical question of your Knowledge Summary.
* Make sure to include enough keywords so the reader can easily understand the context of the Knowledge Summary.

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**Keywo****rds**

Please provide up to 6 keywords that are aligned to the subject of the Knowledge Summary.

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| **Question (in PICO format)**Write your Knowledge Summary question using the PICO format (Population, Intervention, Comparison, Outcome) to make it clear and focused. Label each part like in the example below:In cats with chronic kidney disease **[population]** does feeding a kidney prescription diet **[intervention]** compared to feeding an ordinary diet **[comparison]** results in an increase in life expectancy **[outcome]****Clinical bottom line**Before completing this section, please read our [Guidance for writing a Clinical Bottom Line](https://veterinaryevidence.org/index.php/ve/writing-the-clinical-bottom-line).* **Category of Research Question:** indicate the category of research question that was addressed: treatment/prognosis/risk/diagnosis/prevalence/incidence
* **Number and Type of Study Designs Appraised:** Say how many studies you critically appraised and what type of studies they were (e.g. randomised controlled, cross-sectional, cohort, etc).
* **Strength of Evidence:** State whether the selected papers overall provide zero, weak, moderate, or strong evidence based on their design and how well they were carried out.
* **Summary of Outcomes:** Briefly describe what the studies found overall.
* **Conclusion:** Write a conclusion to the PICO question based upon the strength of evidence and the outcomes identified by the critical appraisal of the studies, and indicate the implications for clinical practice
* **Additional Comments and Caveats:** Briefly include any important points, limitations, or considerations relevant to the findings.
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**Clinical scenario**

Word count: 100

This section provides the reviewer/readership with context i.e. why is this question important.

Provide a short paragraph describing a clinical situation that might lead a veterinary professional to look for evidence. It should help the reader picture the practical context, not review all the existing evidence.

**The evidence**

Word count: 200

# Please provide 1 – 2 concise and focused descriptive paragraph(s) regarding the strength of evidence provided, based purely on the studies you have identified.

# The strength of the evidence is directly related to the quality and type of experimental design. Strong evidence may support or not support a change in clinical practice.

**Summary of the evidence**

Word count: 700 for each article appraised

If you encounter difficulties accessing papers, please [contact us](https://veterinaryevidence.org/index.php/ve/about/contact) for assistance.

For each article appraised, copy and paste the table below as needed—there is no limit on the number of papers, so long as the studies directly address your PICO question. Keep your summaries clear, concise, and balanced. Readers can refer to the original papers for further details.

Bear in mind that your Knowledge Summary should be a time saving tool to help those in practice make informed decisions.

Before writing, review the following previously published Knowledge Summaries for guidance on appropriate detail and format. Note that the template has evolved, so follow the current guidance where inconsistencies exist.

Four papers: [10.18849/VE.V7I3.581](https://doi.org/10.18849/ve.v7i3.581)

Two papers: <https://doi.org/10.18849/ve.v7i4.587>

Zero evidence paper: [10.18849/VE.V7I3.599](https://doi.org/10.18849/ve.V7I3.599)

**What if there is insufficient or zero evidence to answer my PICO question?**

If your search yields no primary research literature, please contact us. A lack of evidence is a significant finding, especially for important and common clinical questions that impact patient care. The absence of published research highlights gaps in current knowledge and can help drive future studies. The value of identifying insufficient or zero evidence is often underestimated, but it plays a crucial role in shaping veterinary evidence-based medicine.

For reference, visit our [Strength of Evidence](https://veterinaryevidence.org/index.php/ve/strengthofevidence) page to explore published Knowledge Summaries categorised by the strength of evidence found.

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| 1. **Author surname (year)**
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| 1. **Title of study (DOI hyperlinked)**
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| 1. **Aim:** Sentence summarising the aim of the paper.
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| **Study design:** | **Study design described in the paper**State the study design as described in the paper e.g. randomised controlled design, cohort study etc **Study design described by you**If no study design is reported in the paper or you think the study design has been incorrectly described, then write what you think it is. In the latter case please place a comment in the appraisal section with an explanation.  |
| **Interventions:** | **The experimental intervention details that relate specifically to the PICO question should be reported in this section. This will be dependent upon the category of question being addressed and the study design used. These details may include:****Target population –**Describe the study target population**Sample** Describe the inclusion and exclusion criteria used**Treatment groups**Describe the treatment groupsDescribe the sample size of the treatment groupsDescribe the method used to allocate the sample subjects to the treatment groupsDescribe the treatment protocols for each groupinclude doses, duration, frequency and techniques used - if relevantIf there are protocol changes during the course of the study these may need to be includedAdditional experimental detail that may be needed to help the reader understand the interventions within the study design e.g. laboratory techniques employed, experimental timeline, statistical analysis can be included in this section.  |
| **Outcome studied:** | List the key variables measured relevant to the PICO question. |
| **Main findings****(relevant to PICO question):** | Bullet point synopsis of the main findings that correspond clearly with the intervention details and the PICO question.Ensure all variables listed in the outcome studied section are reported.Ensure that the reporting of study findings includes (where possible) the following:* The direction of any significant effect
* A p value and / or 95% confidence interval where a significant effect is reported
* A measure of descriptive statistics per group e.g. mean/median/%, plus a measure of variation (e.g. standard deviation) (where possible). If the original author reports this data as a figure, identify the figure where this information may be found within the original paper.
* If the original author fails to report this level of detail please indicate this within this section

(Note: Report only findings from the paper . Personal interpretations or calculations should be included in the Appraisal section and clearly marked as such.)For resources to assist in understanding the statistical analysis within a paper and interpretation of study findings, please refer to the ‘Quick Guide to Commonly Used Statistical Tests‘and the Glossary of Clinical Research Terms insert link to resources/glossary. |
| **Limitations:** | Critically assess any important limitations identified with the study design, reporting or findings of the appraised papers. This is an important section which identifies elements that may reduce the strength of evidence. Factors to be considered in the study design may include the sample size, bias, blinding, control of variables, appropriate use of statistical tests, the power of the study, the accuracy and precision of any variable measurements made, the sample population and other components that may reduce the strength of evidence provided by the study. |
| **Strengths** | This important section identifies elements that may enhance the strength of evidence. Factors to be considered in the study design and implementation may include the sample size, bias, blinding, control of variables, appropriate use of statistical tests, the power of the study, the accuracy and precision of any variable measurements made, the sample population and other components that may enhance the strength of evidence provided by the study |
| **Strength of evidence** | Indicate whether the study provides zero, weak, moderate, or strong evidence in terms of their experimental design and implementation according to the definitions provided to Authors based upon the critical appraisal of the study |

# Appraisal, application and reflection

 Word count: 1000

Keep this section concise—it should offer practical context rather than a detailed review of the literature.

This section is about contextualising what you’ve found and how this can be put into practice. Remain focused on the clinical question and PICO of the Knowledge Summary. This section should critically assess the strength of evidence provided by the appraised studies in relation to the PICO question. Keep responses focused, aiming for three structured paragraphs:

1. **Internal Validity**: Assess the overall strength of the body of evidence. Consider study design, sample size, risk of bias, and methodological limitations. What level of confidence do we have in the outcomes reported in the studies to answer the PICO question? Highlight key strengths and weaknesses.

2. **External Validity**: Discuss how well the findings apply to the target population(s) and clinical setting. Are there limitations in breed, species, geography, or clinical practice that affect generalisability?

3. **Practical Application** **and Reflection**: Summarise the clinical relevance of the findings. What are the implications for practice? Are there gaps in the evidence that need further research?

This section may include a few additional references to help relate the outcomes to clinical practice, but these should be kept to a minimum. Avoid expanding this section into a narrative literature review going beyond discussing the PICO. Note the word limit is 1000 words.

References must be included where appropriate.

**Methodology – Literature Search**

1. **Need help?** [Contact us](https://veterinaryevidence.org/index.php/ve/about/contact) for assistance with your search strategy and literature search.
2. **Database selection:** Use CAB Abstracts as your primary source, plus at least one additional database of your choice.
3. **Search strategy timeframe:** Ensure your search strategy is no older than two months at submission. If it exceeds this, contact us, and our library team can rerun the search for you.
4. **Accessing papers:** If you are unable to locate or access a paper, reach out to us—we may be able to source it for you.

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| **Search**  |
| Databases searched and dates covered: | List each of the databases and platforms used and include the dates:e.g.CAB Abstracts on OVID Platform 1973- Week 1 2024 |
| Search strategy: | Give the search strategy including Boolean operators exactly as used for each database to ensure it is reproducible:e.g.**CAB Abstracts:**1. (preoperative or pre-operative or presurgery or presurgical or pre-surgery or pre-surgical)
2. ((site or skin) and (technique or techniques or method or methods or preparation))
3. ((scrub or scrubs or scrubbing) and (technique or techniques or method or methods or preparation))
4. 1 and (2 or 3)

 **PubMed:**(((preoperative or pre-operative or presurgery or presurgical or pre-surgery or pre-surgical)) AND ((site or skin) AND (technique or techniques or method or methods or preparation))) AND ((scrub or scrubs or scrubbing) AND (technique or techniques or method or methods or preparation)) |
| Dates searches were performed: | The search strategy date should be no older than **2 months** at the point of submission. Please contact us if your search strategy will be older than 2 months, and our library team will be happy to rerun the search for you.Date search performed format: 31 Mar 2021 |

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| **Exclusion/Inclusion Criteria** |
| List the exclusion/inclusion criteria that you used to identify the papers for appraisal in your search results. |
| Exclusion: |  |
| Inclusion: |  |

Please add or delete rows and columns as necessary.

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| **Search Outcome** |
| **Database** | **Number of results** | **Excluded – please state criteria** | **Excluded – please state criteria** | **Excluded – please state criteria** | **Excluded – please state criteria** | **Total relevant papers** |
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| Total relevant papers after duplicates removed  |  |

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| **References** |

**E SUBMISSION**

Always use the author-date system. This relies on brief parenthetical citations in the text that take the reader to the appropriate entry in the reference list. The reference list only contains those sources cited in the text. All references included in the reference list should exclusively be cited within the article.

The text citation should consist of just the author’s last name and year of publication. If the paper contains citations to works by different authors sharing the same last name, then their initials should be used to distinguish between them.

 (Smith, 2021)

 (Smith & Jones, 2021)

(Smith, A. & Smith, B. 2021)

 (Smith et al., 2021) – do not italicise et al. where there are three authors or more.

If the author’s last name appears in open text, it need not be repeated in parentheses, the date alone will suffice – According to Smith et al. (2021) dogs in…

Several references may be included within the same parentheses separated by a semi colon – (Smith et al., 2021; Jones & Morris, 1988; and Baker, 1984)

If there is more than one work by an author in a single year they are distinguished by lower-case letters appended to the year – (Smith, 2021a), (Smith, 2021b).

Citation of a work produced by a corporate body may use the name of the body, followed by the publication date. After the first citation instance, where the corporate body’s name should appear in full, subsequent citations to the same body may be abbreviated

Citations to an anonymous work may use anon. followed by the publication date

Reference list entries are listed alphabetically. Authors initials should follow their last names. The year of publication should follow the author name(s). Journal titles should be in full and italicised. Please provide a DOI number where possible.

Journals:

Last name, First initial. (Year published). Article title. *Journal*. Volume(Issue), Page(s). DOI: DOI identifier

Examples –

Poole, A. (2021). ‘Don’t pee on that!’ Comparing environmental modification and medical management in cats with FIC. *Veterinary Evidence*. 6(1), 1–20. DOI: <https://doi.org/10.18849/ve.v6i1.337>

Thomas, J., Marshall, S., Gormley, K., Conway, G. & Borgeat, K. (2021). Does medical or surgical treatment for aortic stenosis improve outcome in dogs? *Veterinary Evidence*. 6(2), 1–13. DOI: <https://doi.org/10.18849/ve.v6i2.368>

Chapters in edited books:

Last name, First initial. (Year published). Chapter title. In: First initial. Last name, ed., *Book title,* 1st ed. City: Publisher, Page(s).

Websites:

Last name, First initial. (Year published). Page title. Available at: URL Accessed Day Mo. Year.

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| **Withdrawing a paper** |

**Author-Initiated Withdrawal:**

* Authors may request to withdraw a paper, but they should first discuss their reasons with us, as we aim to prevent unnecessary withdrawals and respect the time invested by editors and reviewers.
* If withdrawal is necessary, authors must submit an explicit request to the editorial office, no later than after the first round of peer review.
* The request must be agreed upon by all authors and include detailed reasons for withdrawal.

**Editorial Withdrawal:**

* *Veterinary Evidence* may withdraw a paper if there is a conflict of interest or evidence of misconduct, following [COPE guidance](https://publicationethics.org/).
* For further information, please contact the [Editorial Office](https://veterinaryevidence.org/index.php/ve/about/contact).

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| **Audio Summary guidelines**  |

Upon acceptance of your paper, we will request an Audio Summary—a 3-minute overview of your Knowledge Summary. This helps listeners quickly understand the key points and apply the findings in practice.

**Suggested Structure:**

1. Background:
	* What question does your Knowledge Summary answer?
	* Why did you choose this question?
2. Summary of Evidence:
	* What evidence exists?
	* What does it conclude?
	* What is the clinical bottom line?
3. Practical Application (if applicable):
	* How can the findings be implemented in practice?

Feel free to adapt your summary but ensure it does not exceed 3 minutes.

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| **Author Declaration forms, Ethical Approval and Informed Consent** |

**Required Documents:** Every submission must include a Conflict of Interest and Author Declaration form.

**Submission Process:** These documents must be uploaded to Editorial Manager alongside your manuscript. Your submission cannot proceed without them. You will be asked for this as a required document at the point you upload your manuscript.

**Double anonymous Peer Review:** These forms are separate from the manuscript to maintain author anonymity during the review process.

**Download Forms:** Access the required documents here:[*Veterinary Evidence* Forms](https://veterinaryevidence.org/index.php/ve/forms).

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| **Submission process** |

**Submitting Your Paper**

1. Submit your paper to our submission system: [Editorial Manager](https://surreyac-my.sharepoint.com/personal/pc0046_surrey_ac_uk/Documents/Documents/2.%20Editor%20in%20Chief%20Veterinary%20Evidence/1.%20EinC%202024%20onwards/KS%20template%20update/www.editorialmanager.com/rcvskve)
2. Paper Progress & Queries:
	* The Editorial Office will keep you updated on your paper’s progress.
	* For any questions, please contact *Veterinary Evidence*.

**Publication Policies**

* Please review *Veterinary Evidence’s* [editorial policies](https://veterinaryevidence.org/index.php/ve/editorial-policies) before submission.

**EBVM Learning**

* [EBVM Learning](http://www.ebvmlearning.org/) is a resource that introduces the concepts of Evidence-based Veterinary Medicine (EBVM), and aims to give you a foundation from which you can start to apply EBVM to your own veterinary work.

**Intellectual Property Rights**

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**Disclaimer**

A Knowledge Summary provides information derived from a limited number of specified scientific journal databases, using declared search functions and nominated time periods which are explicitly described within the paper. Whilst the databases used cover a wide range of veterinary journals it is important to recognise the Knowledge Summary reflects the information derived from the scope of the searches used.

Knowledge Summaries are a peer-reviewed article type which aims to answer a clinical question based on the best available current evidence. It does not override the responsibility of the practitioner. Informed decisions should be made by considering such factors as individual clinical expertise and judgement along with patients’ circumstances and owners’ values. Knowledge Summaries are a resource to help inform and any opinions expressed within the Knowledge Summaries are the author's own and do not necessarily reflect the view of RCVS Knowledge. Authors are responsible for the accuracy of the content. While the Editor and Publisher believe that all content herein are in accord with current recommendations and practice at the time of publication, they accept no legal responsibility for any errors or omissions, and make no warranty, express or implied, with respect to material contained within.

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[**https://www.veterinaryevidence.org/**](https://www.veterinaryevidence.org/)

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