Editorial Introduction: Taking the Reins

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Since its inception in 1996 as Athletic Therapy Today, the mission of this journal was to bring current issues and cutting-edge techniques related to the recognition, prevention, and rehabilitation of sport-related injuries to the practicing clinician. The journal has undergone several major transformations in the past 12 years under the leadership of Gary Wilkerson. He has accomplished a great deal in his tenure as editor, including changing the journal name from Athletic Therapy Today to the International Journal of Athletic Therapy and Training (IJA TT), acquiring an impact factor for the journal, securing an international presence as a peer-reviewed publication source, developing a cross-journal relationship with the Journal of Athletic Training, and expanding the types of columns beyond case studies and clinical commentaries to include other forms of clinical evidence. Our plan is to continue the evolution of IJA TT and ensure that its foundational mission is met through the rigorous demands of the fast-paced informational age in which we practice.

Our primary goal as the new editors of IJA TT is to provide an outlet for both clinicians and researchers that incorporates the foundational tenets of evidence-based practice (the integration of the best available research evidence, clinical expertise, and patient values) to advance the recognition, prevention, and rehabilitation of sport-related injuries and conditions. To do so, we will be expanding the types of columns published in IJA TT to include various sources of evidence that can aid in enhancing clinical practice. Specifically, we are looking to highlight and focus on two major areas of clinical research: clinical case presentation and critical summaries of clinical evidence. We believe that these two areas provide excellent resources for clinicians and are directly related to generating evidence on best practices. For the rest of this editorial, we have summarized the specific study designs that fall within these two areas.

CRITICAL SUMMARIES OF CLINICAL EVIDENCE

Critically Appraised Topics

Critically Appraised Topics (CATs) are brief reviews and critiques of the literature. They are used to summarize the best available patient-oriented evidence to answer a specific clinical question. For a CAT, a clinical question is posed—a question that is both specific and answerable. Many CAT clinical questions follow the PICO format—patient group of interest, intervention of interest, comparison group or intervention, and outcome of interest. This is one of the more common formats; however, other variations do exist. Once the clinical question is developed, there is a search for the most relevant (usually only about 5 studies) and current literature to answer the question. For CATs, the literature focus should only go back about 5 years to keep to the most up-to-date results. The included studies are then critically appraised, and a summary of the results and critical analysis are used to formulate the answer to the clinical question. Well-written CATs should be easily digestible by the reader and directly applicable to clinical practice. These summaries have a shelf life of approximately 2 years and will need to be revisited and updated on a regular basis.

Systematic Reviews

Systematic reviews are similar to CATs, but larger in scope. They are also critical reviews, but are...
comprehensive and require an exhaustive search of the best available literature. Typically, there is some sort of quantitative analysis of the included studies, such as the calculation of effect sizes to determine the magnitude of the difference between groups. Moreover, systematic reviews may be used to answer multiple clinical questions. A systematic review may include a meta-analysis, which is a pooled calculation of the quantitative analyses that were performed. The overall result is a comprehensive critical appraisal and summary of the best available clinical literature.

**Clinical Research Reviews**

Clinical research reviews (CRRs) are evaluations and summaries of published, peer-reviewed clinical research studies. Typically, a CRR provides a synopsis and critical appraisal of a systemic review or well-designed individual clinical study that has been published elsewhere. For *IJA TT*, we are especially interested in CRRs that review questions that are clinically relevant to athletic training or sports injury rehabilitation and that are published in journals that may be more obscure or perhaps more inaccessible to practicing clinicians.

**Individual Case Studies**

Individual case studies are reports of observations from the field with regard to the recognition, prevention, and rehabilitation of sport-related injuries.

For case studies associated with the recognition of a particular condition or injury, our goal is to highlight the clinical reasoning process by which the recognition of these types of injuries or conditions can be enhanced. The elements within this format of case study will include:

1. Identification of key features of the case that led to the differential diagnosis.
2. Problems identified on the basis of the diagnosis.
3. Management insights based on the anatomical, physiological, and biomechanical contributing factors associated with the diagnosis.
4. Recommendations for clinicians in the future about the key elements for the recognition and management of the condition.

For prevention and rehabilitation case studies, we will especially be looking for studies with an n-of-1 design in which a previously described protocol was carefully implemented for a patient with a particular condition. The goal of these case studies is to address whether the outcomes of the patient in the case study were similar to the outcomes established in the previously described clinical trial. As our health care system continues to drive toward outcome-based care, we desperately need to link the results from controlled research to outcomes in real-life practice.

**Case Series**

A case series provides an avenue for practicing clinicians to present similar trends across multiple cases in the recognition, prevention, and rehabilitation of sport-related injuries. Within a case series, several case studies on the same topic are linked together to demonstrate consistency of clinical findings across multiple patient observations. These reports are critically important for generating relevant questions related to the systematic investigation of the factors that led to the development or resolution of a particular injury or condition.
As Gary passes the editorial torch to us, we look forward to advancing the IJATT mission to meet the needs of the practicing clinician in the information age. We will continue with columns, such as Research Reports and Population-Specific Concerns, that have brought IJATT such broad and loyal support. Furthermore, we are energized by the opportunity to provide a unique outlet for clinicians and researchers in which the concepts of evidence-based practice enhance outcomes for athletic therapy and training. In the coming issues and on the website, we will provide updated author guidelines for these study designs. We are excited to continue to provide the readership of IJATT with access to the best available clinical literature in athletic therapy and training, and we look forward to new manuscript submissions!

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