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December 2017
1. Introduction

The senior sophister research assignments will make up 30% of the overall final year examination. The research assignments will be made up of a literature review and related research proposal and a separate submission of the research report in paper format of a group research study. Both submissions must be individually written up and submitted, representing the individual student’s own written effort.

2. Literature Review & Research Proposal

The literature review and research proposal will make up 50% of the overall marks. The literature review will be no greater than 3000 words. The research proposal will be no greater than 1500 words. The combined literature review and research proposal will be no greater than 4500 words excluding references or appendices. The word count must be presented on the first page of the submission.

In general, the majority of students follow the word count requested very well and present work that is within the word count prescribed for the submission. A very small proportion do not and to be equitable and open about how excess word counts are managed by the examiners, the following will apply.

- Word count in excess of $>1\% \leq 10\%$ will result in 10% of total mark deducted
- Word count in excess of $>10\% \leq 20\%$ will result in 20% of total mark deducted
• In excess of 20% - work returned as not satisfactory and marked as 0%. Re-submission will be required as this first presentation will be considered a ‘fail’.

On the week beginning October 31st 2017, Dr. Gormley will provide details of the literature review and research proposal. Thereafter there are further sessions as required to discuss the literature review and research proposal with Dr. Gormley. Other members of the academic staff are available for consultation and advice, by arrangement. Submission of the completed literature review and research proposal and work will be no later than Friday 16th February 2018. The finished assignments must be handed into the Executive Officer in the Physiotherapy office (two hard copies and one electronic copy).

3. Presentation of the Literature Review and Research Proposal

3.1 General requirements

The final assignments must be presented in the following format:

• The assignments must be typed in one and a half or double spacing on A4 paper.
• The pages must be numbered.
• Two hard copies are required plus a copy on disk.

Tables, figures, appendices and references may be additional to the word limit.
There is a conventional way of presenting information under appropriate headings; this gives information in a logical and generally accepted way. The order in which the report is eventually presented is not necessarily the order in which you write it; it is often easier to write the summary after you have completed the full report.

Those writing reports usually find it best to write a section and then leave it for a short time; when you come back to it many mistakes and grammatical errors are quite obvious. It is also helpful to ask someone else to read it and comment on different aspects.

The first page after the title page must be the Declaration which has to be signed by the student (Appendix 1).

You may find Appendices 2 & 3 helpful when reviewing the literature for your Literature Review and Research Proposal.

### 3.2 Headings for the Literature Review & Research Proposal

#### 3.2.1 Title

This is important as it will be what attracts or otherwise in the first place. It should be accurate and brief, but must indicate the content of the project.

#### 3.2.2 Summary/Abstract
This should contain a brief analytical outline of the problem in about one hundred words.

3.2.3 Introduction

The purposes of the study are clearly stated in this section. A brief outline is given including some references to set the scene of other work in this or related areas. General expectations about the outcome of the study should be given with the reasons on which they are based. It states the problem and reasons for the investigation.

3.3.4 Literature Review

This is a means of finding out if research in the area has been published. It usually involves a systematic review of what others think, or have done, in the area, and it may provide information for solving the problem. It may offer some insights into a technique or a methodology used in measurement or in collection of data. Conclusions offered by other researchers should be considered with regard to the basis upon which they make their statements. Is it opinion or based on the data used? Is it based on experience or on controlled observation? The review helps to identify inadequacies or weaknesses of previous studies and should be a critical appraisal of other researchers in the field. It leads to the formation of the aims and objectives.
3.3.5. Research Proposal

The methodology describes the general features of the approach and the research design used. Appropriate information will vary with the type of study undertaken.

In this section you should state specifically:

- The details of any apparatus, how and why you selected it;
- The materials, subjects and equipment to be used. Diagrams and illustrations may be useful in this section;
- The procedure: this must be described in detail. The guiding principle here is that there is sufficient detail to enable someone else to repeat the study;
- The calculations necessary to give meaning to the observations, i.e. the statistical tools to be used (but not the detailed calculations).

There should be reference here to efforts made to control and identify different aspects such as inter- and intra-rater reliability. Full details of questionnaires should be given in an appendix, but an indication of the type of questions used could be given here.

3.3.6 References

There are a number of ways to quote literature references. One of them, the Harvard System, is the one required in the Discipline of Physiotherapy. In this system the author and date of publication appear in brackets, in the body of the text. A reference list at the end of the document contains all the journal articles and books referenced in the text, in alphabetical order, by author's surname. Please follow the system outlined in Appendix 7
4. Research Report

The research report will contribute 50% of the research assignment. Students will be informed of research themes and related supervisors at the start of Semester II. They will form groups of up to 6 people and inform the supervisor, by e-mail, of the names of the students in the group. The supervisor will be available to the students as timetabled during this stage. Group tutorials or individual meetings with students will be arranged as required.

The undertaking of the research project will be done in Hilary term and will be supervised as timetabled. Methods of data analysis will be discussed during these sessions. The report will be submitted no later than the Tuesday 3th April 2018. The finished assignments must be handed into the Executive Officer in the Physiotherapy administrative office. The individual report will be written up in paper form and will not be greater than 3000 words. Word count penalties as described above in section 2 will apply.

You may find the aide-memoir in Appendix 4 useful in preparing your Research Report.


Each of the assignments i.e. (i) Literature Review and Research Proposal and (ii) Research Report (Assignment) are marked independently by two markers who then agree a combined mark.

In addition, all students are eligible to be called for a viva on submission of their Research Report. A viva may be called at the request of the supervisor, internal examiner, external examiner, or student involved.
Any request for a viva must be submitted in writing to the Head of Discipline of Physiotherapy. The submission must include the reasons for the request. The request must be made before project marking has been completed or at the time of submission.

It is not policy of the Discipline of Physiotherapy to invite students for Viva Voce in the case of a First being awarded.

5.1 Criteria for calling a viva include the following:

- Borderline pass/fail projects
- Difficulties between students in a group
- Illness of student
- Clarification regarding authenticity
- Clarification regarding input to the project

5.2 Conduct of the viva

The viva will be conducted by the person who requested it and one other (not the supervisor unless the supervisor is the one requesting). If a student requests, the internal examiner will not conduct the viva, the internal examiner will take the students place in this matter. The viva will be conducted by appropriate persons designated by the Discipline of Physiotherapy Staff. The supervisor will be present unless requested otherwise by the student.

The viva is to be taped, recording both questions asked and the answers given. The tape will be kept until the student is commenced. The duration will be no longer than 30 minutes.
5.3 Scoring the viva

Prior to the viva the project is marked as usual. If a viva is required the student will be notified 10 days in advance and requested to attend.

The scoring used would be based on the relevant areas of the project marking criteria, clarity of presentation, understanding of topic and its' relevance, justification of the methodology, knowledge of the literature in the area, discussion of the results including analysis.

Failure to attend for a viva due to sickness must be accompanied by a medical note. Failure to attend without other extenuating circumstances will result in a fail mark.

Failure of a viva warrants a resubmission. Nonetheless, students may appeal within calendar regulations.
I / we _____________________________ do hereby declare that this work submitted for appraisal as part fulfilment for BSc Honours in Physiotherapy is an original work. The work has not been submitted previously within the University of Dublin or elsewhere as part of a degree, diploma or other qualification.

I / we further declare that the work involved in the project was carried out entirely by myself.

My / our permission is hereby given that the School of Physiotherapy, University of Dublin, Trinity College may lend this project for reference purposes.

Finally, I / we agree that this project is the property of the University of Dublin, Trinity College and will not be submitted for publication or circulation without the written permission of the project supervisor.

Signed ___________________________     Date __________
APPENDIX 2 HOW TO CARRY OUT A LITERATURE SEARCH

The aim of a literature search is to provide you with a list of references to books and articles on a chosen topic. From this you can select which articles you want to read. Allow as much time as possible for your search as it is an essential foundation for any research project or investigation. The article below is taken from the BMJ and should be of help to you.

---

BMJ No 7101 Volume 315 Education and debate: Saturday 19 July 1997

How to read a paper - The Medline database

Trisha Greenhalgh

This is the first of 11 articles introducing non-experts to finding medical articles and assessing their value.

These can be accessed via the following link:

http://www.bmj.com/about-bmj/resources-readers/publications/how-read-paper

In 1928, in his introduction to Sceptical Essays, Bertrand Russell wrote: “The extent to which beliefs are based on evidence is very much less than believers suppose.” Medical beliefs, and the clinical practices that are based on them, are a case in point. Debate continues as to whether scientific evidence alone is sufficient to guide medical decision making, but few doctors would dispute that finding and understanding relevant research based evidence is increasingly necessary in clinical practice. This article is the first in a series that introduces the non-expert to searching the medical literature and assessing the value of medical articles.

Summary Points
- Not all medical articles are indexed on Medline, and many that are have been misclassified.
- Searching by textword can supplement a search by MeSH headings.
- To increase the sensitivity of a search
APPENDIX 3 GUIDELINES FOR APPRAISING A RESEARCH PAPER

Taken from *Physiotherapy*, July 1987, vol 73, no 7

---

**Title**

- Is it informative, interesting and to the point?

**Author/s**

- Who undertook the research?
- For an evaluation of treatment, is the researcher likely to have sufficient knowledge of physiotherapy?
- Has the physiotherapist participated in the design of the study and the interpretation of results, or has he/she been collecting the data for a member of another discipline or profession?

**Abstract**

- Does it summarise the main points of the study adequately and accurately?

**Introduction**

- *The problem:* Is the problem or purpose of the study clearly stated?

- *The question/s:* Is it/are they stated clearly and concisely? Does it/do they follow logically from the problems? Is it/are they worth answering? Is it/are they answerable?

**The Literature**

- Is the background information adequate?
- Does the author appear to know her/his subject?
- Does she/he appraise related research and authoritative statements?
- Has she/he strung together citations and quotes which support her/his proposal without consideration of antagonistic arguments?
• Are specific theories used in order to put the study, and potentially the findings, into context?
• Does this theory seem relevant?

Need

• Is the study placed in the context of current professional knowledge?
• What is the potential contribution of the study to practice?

Aims

• Are the aims stated clearly, concisely and precisely?
• Are they logically related to the original questions(s)?
• How were they formulated, e.g. does evidence from the literature support intuition, instinct and experience?
• If treatment is being investigated, are the aims related to efficacy and safety?

Method

• Design:
  o Is the study descriptive or experimental?
  o Is it described adequately?
  o Does the chosen design seem appropriate to you?
  o A hypothesis or hypotheses is/are necessary for experimental design: does it/do they follow logically from the original problem and theories?
  o Are any assumptions made?
  o Is their use explained?
  o Are they justifiable and valid?
  o Was a pilot study completed e.g. was a questionnaire or special report pre-tested for validity and/or reliability?
  o Were modifications made?
  o What were they and why?

• Ethical considerations:
  o Has the author considered the ethics of the proposal?
  o Is the proposal method ethically acceptable? E.g. Will all patients receive the treatment they need rather than the treatment needed for the study?
  o Will a control group be required to receive bogus or dummy treatment of dubious efficacy?
• **Samples and participants**
  o How were people selected?
  o Are individuals allocated to alternative treatment groups?
  o How?
  o Is this ethical?
  o Is there an account of how each person was chosen?
  o Were specific criteria used to include and/or exclude in or from the study?
  o Are they clearly stated?
  o Is the reasoning behind them apparent and sensible?
  o Was a specific size of sample chosen (e.g. for statistical purposes)?
  o Does it seem adequate to provide utilisable results?
  o If the author aims to make generalisations to a population on the basis of the findings: Who forms this population?
  o Is the sample representative of this population?

• **Data collection**
  o Is the method described adequately?
  o Could you replicate it from the description?
  o Are the reasons for choice of method stated?
  o If special report forms, assessment forms, questionnaires or interview schedules have been used, are copies provided with the paper or is an address given for copies?

• **Analysis**
  o *Is the method of analysis understandable?*
  o *Have statistical tests been used?*
  o *Are reasons for choice given which explain their appropriateness?*
  o *Do you understand and accept the explanation?*

**Results**

• Are results intelligible enough for you to interpret them and draw your own conclusions?
• Are they relevant to the stated problem?
• Does your background knowledge and common sense indicate that they are realistic and feasible?
• Are ‘raw’ data given, or only proportions, percentages etc. after manipulation?
• Are histograms, pie-charts and other graphic representations explained?
• Are the tables helpful?
• If results are based on responses to a questionnaire or interview schedule, what is the response rate?
• Are statistical results included? Are they meaningful?
• Is the statistical probability of results by chance included? Is it appropriate?

Discussion

• Are the results interpreted in relation to the original question/s?
• Are the original questions answered?
• Have the aims been fulfilled?
• Does the author discuss any weaknesses in the methodology and factors which may have affected validity or reliability? E.g. should selection of sample be discussed?
• If criteria of inclusion and exclusion need elucidation, is the explanation acceptable?
• Should the advantages and disadvantages of the method of data collection be discussed? Are they? Have you noticed anything that was omitted? Has the author referred to it or ignored it?
• Have the findings been related to the existing body of knowledge and relevant theory?
• Are the clinical implications discussed?
• Was the project funded? By whom? Might the results be biased because of the interests of the financing body?

Conclusions

• How do they compare (or contrast) with the conclusions you drew from your interpretation of the results? Do they relate logically to the results?

Recommendations

• Are the recommended changes self-evident from the reported results?
• Could you attempt to implement them, and should you?
• Which unanswered questions could be reformulated in the light of the results?
• Is this study an end in itself or does it suggest further research?
• Does the author suggest ways in which the study could be added to produce more comprehensive findings?

References

• Is the length of the list more impressive than its quality?
• Are any references conspicuous by their absence
APPENDIX 4 PREPARING A RESEARCH PROPOSAL

The aide-memoire below has been produced from the paper by Professor M.D. Warren published in the BMJ, 1978, 1, 1195-6. A few minor amendments have been made where it seemed appropriate for the needs of physiotherapists.

AIDE-MEMOIRE FOR PREPARING A PROTOCOL

The questions and suggestions listed below are intended as an aide-memoire for those planning a research project, whether this is to be a descriptive study, a clinical trial or a survey. The protocol should set out the aims of the project, how these are to be achieved, how bias will be eliminated, the subjects or the types of patients to be studied, the ethical aspects and the proposed statistical analysis. It should establish that the expenditure of effort, time and money is likely to be worthwhile. Planning and statistical advice should be sought at the preliminary stages of the study.

1. **What is the problem?**

What are the aims and precise objectives of the study? What questions are to be answered? Is the purpose to evaluate a new treatment, procedure or service, to obtain new facts about the causation or natural history of a disease, or for the future planning and evaluation of a service?

2. **What is already known about the problem?**

What are the gaps in present knowledge? How will the proposed study contribute to our knowledge and understanding of the problem?

3. **Is the proposal a pilot or main study?**
4. **What design will be used in the project?**

Will the study be basically a laboratory project or a survey? Will it be a 'trial' (or 'intervention') or a treatment, procedure or service (therapeutic, preventative or educational)? Will it be a cross-control study with randomised or matched controls? If a survey, will it be conducted by questionnaires, interview or clinical examination? Will it be retrospective, cross-section or prospective (cohort)?

5. **How are the subjects of the study to be chosen?**

What is the population from which the subjects will be drawn (the denominator in incidence and prevalence studies)? Are the subjects of the study the total population of a community or all patients with a certain diagnosis? What are the entry and exclusion criteria for choosing subjects? If controls are to be used, how are they to be chosen? Will a sample of the total population or of all potential subjects be examined? How is a sample to be obtained to ensure that it is representative of the total population? Attention must be paid to the definition of the criteria for selection, to the sampling methods and to the number of subjects needed to obtain a significant result.

6. **What data are to be collected and why?**

What factors (variables) are already thought to affect the outcome? What factors contained in the new hypothesis are being tested? What factors (if present) might distort the reliability or representativeness of the results? What are the indicators or measures of the outcomes of the trial or experiment? The amount of data collected should be limited, though measures of different dimensions of outcome should be used when possible.

7. **What are the treatment schedules or other activities forming the 'intervention' in the study, and how are the variables to be defined**
and measured?

The techniques, dosage, programmes of treatment, prophylaxis, other activities etc. must be standardised; this is especially important in multi-centre studies. Explicit decisions must be taken about how the presence or absence of disease or condition is to be determined (for example soft tissue injury, osteoarthrosis), how severity and duration are to be measured and how social and demographic variables are to be defined and measured (for example marital status, occupation and social class). If possible the proposed definitions and measurements should be consistent with those used in comparable studies; if they are not, the reasons for the differences should be stated.

8. How are the data to be collected and measurements to be made?

Have the methods been tested? Are they valid (that is, do they actually measure what they are intended to)? Are they reliable (that is, can they identify all positive cases)? Are they specific (that is, can they identify only positive cases)? Will date be collected by observation, examination, interview, or from record forms? Will special recording forms be needed? Who will collect the data? What training will they need? Should an independent observer make the baseline or outcome measurements (or both)? What checks and controls will be used to maintain accuracy and objectivity?

9. How will data be processed and analysed?

Will this be done by computer or some other method? Who will do this? How will the analysis proceed? How will the data be presented? What form of publication is likely to result?

10. What problems of ethics and etiquette does the project raise?

Are patients rights properly observed? How are the consent and collaboration of patients, doctors, nurses, social workers and others to be obtained? How is the
confidentiality of the data to be ensured? What agreements are to be made about publication? Has the project been approved by the ethics committee?

Other resources you may find useful:


APPENDIX 5: MARKING GUIDELINES FOR LITERATURE REVIEW & RESEARCH PROPOSAL

DISCIPLINE OF PHYSIOTHERAPY – LITERATURE REVIEW AND RESEARCH PROPOSAL CHECKLIST - CRITERIA FOR EXAMINING ASSIGNMENT 1

- PRESENTATION/APPENDIX

  Score - Section 1

  Effective use of grammar
  Good Proof Reading
  Correct Pagination
  Appendices/Figures Numbered 10%
  Cross-referencing

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  Comments

- REFERENCING

  Score - Section 2

  Proper Referencing in text (Harvard system)
  Primary referencing
  Reference list complete 10%
  Reference list accurate

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  Comments
• **LITERATURE REVIEW**

  Literature relevant to study

  Critical Evaluation of Literature

  Logical progression

  Integration of sections

  Justification for proposed study

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  **COMMENTS**

• **PROPOSAL**

  Design of the study

  How subjects will be selected

  What measures will be made-reliability and validity

  Data analysis

  Ethical issues

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APPENDIX 6: MARKING GUIDELINES FOR RESEARCH REPORT

DISCIPLINE OF PHYSIOTHERAPY – RESEARCH REPORT CHECKLIST - CRITERIA FOR EXAMINING ASSIGNMENT 2

• PRESENTATION /APPENDIX

Effective use of grammar
Good Proof Reading
Correct Pagination
Appendices/Figures Numbered (if required)

Cross-referencing 10%

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• REFERENCES

Proper Referencing in text (Harvard system)
Primary referencing
Reference list complete 10%
Reference list accurate

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COMMENTS
INTRODUCTION

Concise introduction.

ABSTRACT

Concise Abstract

Background of study

Main findings included

10%

Justification for study

METHODOLOGY

Clear aims and objectives.

Appropriate methodology for aim of study.

Clarity of admission criteria.

Reliability and validity measurements.

Clear procedure to enable repeatability

20%

COMMENTS

COMMENTS
• RESULTS

Availability of raw data.
Accurate reporting of results. 20%
Clear presentation of appropriate statistics.

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COMMENTS

• DISCUSSION

Discussion and interpretation of results.
Understanding of the significance of the subject.
Ideas intelligently handled.
Good choice of specific issues to illustrate general points. 30%
Critical evaluation of own work.
Indications for further work.

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EXAMINER NAME...
APPENDIX 7 Literature References

Harvard Referencing Style

There are a number of ways to quote literature references. One of them, the Harvard System, is the one recommended in the Discipline of Physiotherapy. In this system the author and date of publication appear in brackets, in the body of the text. A reference list at the end of the document contains all the journal articles and books referenced in the text, in alphabetical order, by author's surname.

Different Journals require different systems of referencing and indeed there are variations on the Harvard System. When preparing a paper for a particular journal it is necessary to follow the style used by the particular journal.

In the body of the text

In Text Referencing

In the text refer to the reference by name (without initials) and the year as follows: If the author's name occurs naturally in the sentence the year of publication follows in brackets.

Example:

Bogduk (1997) described the intervertebral discs, which go to make up the interbody joints, as having two primary functions (if there is one author)

Bogduk and Twomey (1997) have described the intervertebral discs, which go to make up the interbody joints, as having two primary functions (if there are two authors)

Bogduk et al. (1997) have described the intervertebral discs, which go to make up the interbody joints, as having two primary functions (if there are three or more authors)

If the author's name does not occur naturally, then the surname and year should appear in brackets after the sentence or phrase.

More than one author

When a paper by two authors is quoted in the text, both names must be used.

Where there are more than two authors give only the first name followed by 'et al'.

Example:

During forward flexion of the trunk, the spine flexes as the erector spinae muscles act to decelerate descent. (Cailliet 1995) (if there is one author)
During forward flexion of the trunk, the spine flexes as the erector spinae muscles act to decelerate descent. (Cailliet and Browne 1995) (if there are two authors)

During forward flexion of the trunk, the spine flexes as the erector spinae muscles act to decelerate descent. (Cailliet et al. 1995) (if there are three or more authors)

Quotation

When a direct quotation is made, the actual words quoted must be in inverted commas.

Example:

In 1974, Johnston stated: “The issue at this time is not so much what physical therapy will be like in the future but rather, is there a future for physical therapy?”

Secondary references

If the original source is not available, indicate the source from which the information was obtained.

Example:

Jones (1963, cited by Ayres 1967) was the first to use this method of treatment.

Multiple sources

Where a number of authors are referred to in relation to a particular point, list the authors chronologically.

Example:

Davis (1987), Green (1990) and Brown (1994) all used the same criteria.

or

Impaired proprioception can be due to inhibition secondary to nociceptive factors and/or damaged muscle spindles (Browne et al. 1996, Thompson 2008, Jones et al. 2014).

Anonymous sources

If the author is unknown use the corporate author, e.g. Biometrics Limited.
More than one paper by the same author in the same year.

When referring to more than one paper in the same year add a, b, c, etc after the year.

Example:

Black (1998a) carried out a pilot study into the effect of the treatment regime in patients with low back pain. More recently a more substantial study involving a greater number of patients demonstrated positive results (Black 1998b).

Reference List.

Book with one author

AUTHOR'S LAST NAME, First and Second Initial. (Year) *Title*. Place of publication, Publishing company.

Example:


Book with an editor

AUTHOR'S LAST NAME, First and Second Initial. (Ed.) (Year) *Title*. Place of publication, Publishing company.

Example:


Chapter in an edited book

AUTHOR'S LAST NAME, First and Second Initial. (Year) Chapter title. IN: EDITOR's(s) LAST NAME and initials. (Ed.) *Book title* Place of publication. Publishing company.
Example:

Journal article – One author

AUTHOR’S LAST NAME, First and Second Initial. (Year) Article title.

*Journal title*, Volume number (Part): page numbers.

Example:

Journal article- Two authors


Example:

Journal article- Multiple authors


Example:
Electronic article

AUTHOR’S LAST NAME, First and Second Initial. (Year) Article title. *Journal title* [Internet]. Date of publication, Volume(issue), page numbers. Available from: <internet address> [Accessed date].

**Example:**


Newspaper article

AUTHOR’S LAST NAME, First and Second Initial. (Year) Article title. *Newspaper title*.

**Example:**


Web page

AUTHOR’S LAST NAME, First and Second Initial. (Year) Page title. Place of Publication. Publisher if ascertainable. Available at: URL [Accessed Day Month Year].

**Example:**
