RU RMT 22 — Research & Regulations

Lecture 02 — Finding the Evidence — Search Strategy and Source Reliability

Keywords and search syntax · Databases for massage therapy · Judging a source · Reference management and citation

Course structure: Lectures 1–6 Research · Lectures 7–12 Regulation of Massage Therapy in Ontario · 8 instructional days · 56 contact hours · 7 contact hours per dayDelivered in person at Ruhani College and online via Zoom in the same live session, in alignment with CMTCA Accreditation Standards (2024) and the FOMTRAC Inter-Jurisdictional Practice Competencies and Performance Indicators (2016)Research strand, Lecture 2 of 6 — step 2 of the evidence-based practice cycle: Acquire

Where We Are in the Cycle

Lecture 1 gave you a question. This lecture finds the evidence that might answer it.

Recap of Lecture 1

Evidence-informed practice integrates research evidence, clinical expertise, client perspective and practice contextThe five steps are Ask, Acquire, Appraise, Apply, AssessA PICO question converts a clinical uncertainty into something a database can answerThe hierarchy of evidence tells you which design to look for first

Today: step 2, Acquire

Turn PICO elements into keywordsCombine keywords with Boolean operators and search syntaxChoose the right database for the questionFilter results without discarding what you needJudge whether a source can be trusted before you rely on itRecord what you found so you can cite it and repeat the search

RUHANI COLLEGE
OF HEALTH, BUSINESS AND TECHNOLOGY

Learning Objectives — Lecture 2

You will be able to

Extract searchable concepts from a PICO questionGenerate synonyms, alternative spellings and related terms for each conceptUse AND, OR and NOT correctly, and explain what each does to the result countApply truncation, wildcards, phrase searching and field limitsDistinguish keyword searching from controlled-vocabulary searching (MeSH)

You will also be able to

Name the databases most relevant to massage therapy and state what each containsApply filters for date, language, study design and population without over-filteringEvaluate a source using the currency, relevance, authority, accuracy and purpose testIdentify a predatory journalRecord a search strategy so that it can be reproduced and reportedCite sources correctly and avoid plagiarism

RUHANI COLLEGE
OF HEALTH BUSINESS AND TECHNOLOGY

Competency and Accreditation Linkage

FOMTRAC Practice Competencies (2016)

1.2 s.1 — Identify reliable sources of research and professional literature1.2 s.2 — Access research and professional literature1.2 s.3 — Identify evidence relevant to a practice issue1.2 w — Perform basic information management functions electronically: create documents electronically, access information electronically1.1 a — Utilize written communication effectively, including appropriate formatting, grammar and spelling

CMTCA Accreditation Standards (2024)

1.9 — Students have access to curriculum-related references and resources, including electronic resources6.16 — Faculty, staff and students have access to reference materials and up-to-date research related to the massage therapy field2.4 — Teaching methods and materials promote critical thinking and problem-solving skills3.15 — Ethical or behavioural student issues, including plagiarism, are addressed through programme policies and the student code of conduct

PART 1

From Question to Keywords

A search is only as good as the words you put into it. Most failed searches fail before the first result appears.

Step One — Break the Question into Concepts

Take the PICO apart. Each element becomes one concept block.

Example question: In adults with non-specific chronic low back pain, does myofascial release compared with usual care reduce pain intensity and disability at twelve weeks?Concept 1 (P): chronic low back painConcept 2 (I): myofascial releaseConcept 3 (C): usual care — often left out of the search, because comparisons are rarely indexedConcept 4 (O): pain intensity, disabilitySearch two or three concepts, not four. Adding every element usually returns nothingStart with P and I. Add O only if the result set is unmanageably largeRule of thumb: if a search returns zero results, you have too many concepts. If it returns thousands, you have too few or your terms are too broad.

Step Two — Generate Synonyms for Each Concept

Why synonyms matter

Authors do not agree on terminology, and databases match text literallyA study of "myofascial release" will not appear in a search for "fascial technique"Missing one common synonym can hide half the literatureSources of synonyms: the article titles you already have, the database thesaurus, textbook indexes, and the keyword list printed under an abstract

Worked example

Low back pain: lumbar pain, lumbago, LBP, backache, low-back pain, dorsalgiaMassage therapy: massage, manual therapy, soft tissue therapy, bodywork, manual lymphatic drainage, myofascial release, Swedish massagePain intensity: pain score, visual analogue scale, VAS, numeric rating scale, NRS, McGill Pain QuestionnaireDisability: function, functional status, Oswestry, Roland-MorrisWatch spelling variants: fibromyalgia and fibromyalgia; oedema and edema; paediatric and pediatric. Canadian, British and American spellings all appear in the literature.

RUHANI COLLEGE
OF HEALTH BUSINESS AND TECHNOLOGY

Boolean Operators

Three operators do almost all the work. Understanding what each does to your result count is the single most useful search skill.

Operator	What it does	Use it to	Effect on results
AND	Returns only records containing every term	Combine different concepts: massage AND "low back pain"	Narrows — fewer results
OR	Returns records containing any of the terms	Combine synonyms within one concept: massage OR bodywork OR "manual therapy"	Broadens — more results
NOT	Excludes records containing the term	Remove a genuinely irrelevant sense: "massage NOT equine"	Narrows — use sparingly

The standard structure: (synonym OR synonym OR synonym) AND (synonym OR synonym) AND (synonym OR synonym)OR inside the brackets, AND between them. Every effective search in this course follows that shapeNOT is dangerous: it removes any record that mentions the excluded term even once, including relevant onesMost databases process AND before OR unless you use brackets — always bracket your OR groups

Search Syntax Beyond Boolean

Techniques

Truncation: massag* retrieves massage, massages, massaged, massaging, massagerWildcard: wom?n retrieves woman and women; the symbol varies by databasePhrase searching: "low back pain" in quotation marks keeps the words together and in orderProximity: adjacency operators (NEAR, ADJ, W/3) find terms within a set distance of each otherField limits: restrict a term to the title, abstract, author or journal field

Cautions

Truncating too early explodes the result set: cat* returns catatonia, catheter and catabolismSymbols differ between platforms — check the help page rather than guessingPhrase searching on a common phrase can exclude papers that use a slight variantTitle-only searching is very precise and misses a great deal; title-and-abstract is usually the right balanceFull-text searching returns papers that mention your term once in passing. It is the least precise option available.

Controlled Vocabulary — MeSH and Subject Headings

Keyword searching matches the letters an author happened to type; controlled-vocabulary searching matches the concept an indexer assignedMEDLINE and PubMed use Medical Subject Headings (MeSH); CINAHL uses CINAHL Headings; Embase uses EmtreeOne MeSH term collects every synonym: the heading "Massage" retrieves papers that never used the wordExplode retrieves the heading and all narrower headings beneath it in the hierarchyMajor topic (focus) restricts results to papers where the concept is a main subject rather than a passing mentionSubheadings narrow a heading to an aspect: therapy, adverse effects, diagnosis, rehabilitationLimitation: very recent records are not yet indexed, and new concepts have no heading — so combine MeSH terms with keywords using ORBest practice: (MeSH term OR keyword OR keyword) AND (MeSH term OR keyword). Neither approach alone is sufficient.

PART 2

Where to Search

The right database depends on the question. Searching only one is the most common student error.

Databases Relevant to Massage Therapy

Resource	What it contains	Best for
PubMed / MEDLINE	Biomedical and life sciences literature, free to the public, MeSH indexed	Most clinical questions; the default starting point
CINAHL	Nursing and allied health, including manual therapy and rehabilitation journals	Allied health questions; often better massage coverage than PubMed
Cochrane Library	Systematic reviews and controlled trial registers	Finding the top of the hierarchy first
PEDro	Physiotherapy Evidence Database; trials rated for methodological quality	Rated manual therapy and exercise trials
AMED	Allied and complementary medicine	Complementary therapy questions
Massage Therapy Foundation research database	Massage-specific literature and funded research	Profession-specific work and case reports
IJTMB	International Journal of Therapeutic Massage and Bodywork, open access	Profession-specific primary research and case reports
Google Scholar	Broad academic index across all disciplines	Citation chaining and finding full text; poor precision

Choosing and Combining Sources

A practical sequence

Start at the top of the hierarchy: check the Cochrane Library for an existing systematic reviewIf a good recent review exists, your work is largely done — read it and check for newer trialsIf not, search PubMed and CINAHL with the same strategy and compare yieldsCheck PEDro for rated trials in manual therapySearch the profession-specific sources for case reports and practice-relevant workChain citations forward and backward from the best paper you find

Access

PubMed abstracts are free; full text may not bePubMed Central and DOAJ index open-access full textYour college library subscription is the primary route to paywalled articles — CMTCA criterion 1.9 requires that accessAuthors will very often send a copy if you email and ask politelyNever use pirated article repositories; it is a copyright breach and it reflects on the profession

Filtering Results Without Losing the Answer

Date: for fast-moving topics limit to the last five to ten years; for stable anatomy or technique questions do not limit at allLanguage: limiting to English is practical but introduces language bias — say so if you report the searchStudy design: filter to randomized controlled trial or systematic review only after you have seen the unfiltered countAge group, sex, species: exclude animal studies deliberately rather than by accidentFull text available: convenient, but it silently hides relevant work — use it last, not firstHumans: almost always appropriate for clinical questionsRecord the number of results before and after each filter, so you can see what each one cost youOver-filtering is the most common cause of the complaint that "there is no research on this". Remove filters one at a time and watch the count.

Documenting a Search So It Can Be Repeated

What to record

The database and the platform usedThe exact search string, including brackets and operatorsThe date the search was runEvery filter applied, in orderThe number of results at each stepHow many records you screened and how many you kept

Why it matters

A systematic review is only systematic because the search can be repeatedYour assignment in this course requires a documented search strategyIn practice, a documented search is your evidence that you looked before you decidedSearches go stale: a strategy you can re-run in a year is worth ten you cannotKeep it in a simple table: database, string, date, filters, results. One row per database.

PART 3

Judging a Source

Finding a source and trusting a source are two different skills. This part is the second one.

The CRAAP Test — Five Questions for Any Source

Criterion	What you are asking	Warning signs
Currency	When was it published, and has the field moved since?	No date; broken links; superseded guidance
Relevance	Does it address your question, at your level, for your population?	Different population, different intervention, wrong outcome
Authority	Who wrote it, what are their credentials, who published it?	No named author; no affiliation; unknown publisher
Accuracy	Is it supported by evidence, referenced, and verifiable?	Claims without citations; citations that do not support the claim
Purpose	Why does it exist — to inform, teach, sell or persuade?	Product links; sponsored content; emotive language

Apply all five. A recent, relevant source from an unknown author with no references is not usablePurpose is the one students skip and the one that catches most bad sourcesApply the same test to continuing-education material, to conference handouts and to what you were taught in class

Judging the Journal

Signs of a credible journal

A named editorial board with verifiable affiliationsA clearly described peer-review process and realistic timelinesIndexed in MEDLINE, CINAHL, Scopus or the Directory of Open Access JournalsA stated policy on conflicts of interest, ethics approval and data availabilityAn identifiable publisher with a physical addressRetraction and correction notices are published openly

Signs of a predatory journal

Unsolicited email invitations praising your unrelated workPromised publication within days of submissionArticle processing charges revealed only after acceptanceA title that closely imitates a well-known journalAn editorial board listing people who did not agree to serveSpelling and grammatical errors on the journal website itselfPublishing in, or citing from, a predatory journal damages your credibility and the profession’s.

Judging the Author and the Funding

Check the author’s affiliation: a university, hospital or research institute is a positive signal, though not a guaranteeCheck whether the author has published elsewhere in the field, and whether others cite themCheck the corresponding author’s contact details — real research reports provide themRead the funding statement: who paid for the study, and what do they sell?Read the declaration of competing interests, usually at the end of the paperIndustry funding does not invalidate a study; it does mean you read the outcome definitions and the analysis more carefullyNote whether the trial was registered in advance (ClinicalTrials.gov or a similar registry) — registration makes selective reporting visibleThis mirrors your own obligation under the CMTO Standard of Practice: Conflict of Interest, which requires a conflict to be avoided, or else managed and disclosed

Evaluating Websites and Online Material

Domains and their meaning

Government sites (ontario.ca, canada.ca, gc.ca) carry legislation and public health guidance — authoritative for regulatory questionsRegulator and accreditor sites (cmto.com, cmtca.ca, fomtrac.ca) are the authority for standards, competencies and accreditationEducational institution sites vary: institutional pages differ from personal student pages on the same domainCommercial sites exist to sell; treat them as advertising unless proven otherwiseAssociation sites (RMTAO) advocate for members — useful, but not a regulator

Practical checks

Is there a "last updated" date, and is it recent?Are claims linked to primary sources you can open?Does the site sell the thing it recommends?Is the author named, with credentials you can verify?Does the page distinguish evidence from opinion?For anything regulatory, go to the primary source. Always read the Standard on cmto.com rather than a summary of it.

Reading Efficiently — The Screening Sequence

You cannot read a hundred papers. You can screen a hundred and read five.

Screen 1 — Title: does it plausibly address your PICO? Reject fast; you can always widen laterScreen 2 — Abstract: does the population, intervention, comparison and outcome match closely enough to be useful?Screen 3 — Design: is this the kind of study that can answer this kind of question?Screen 4 — Methods: read this before the results. Lecture 3 teaches you what to look forScreen 5 — Results and discussion: read last, and read them against the methods you have already judgedNever read only the abstract and then cite the paper. Abstracts overstate findings routinelyKeep a screening log: how many titles, how many abstracts, how many full texts, how many includedLecture 3 takes this apart in detail — the anatomy of a research article, part by part.

PART 4

Managing and Citing What You Find

Evidence you cannot find again, and cannot attribute, is evidence you cannot use.

Reference Management and Note-Taking

Tools

Reference managers (Zotero, Mendeley, EndNote) store records, attach PDFs and format citations automaticallyMost databases export records directly into a reference manager in one clickA structured spreadsheet works if a manager is unavailable — one row per studyRecord the DOI: it is the permanent identifier and the fastest way back to the paper

What to capture for each study

Full citation and DOIDesign, sample size, populationIntervention and comparison, described in enough detail to reproduceOutcome measures and time pointsKey results with numbers, not adjectivesYour own note on limitations and applicabilityAlways check an auto-generated citation against the source. Reference managers make predictable errors with journal names, capitalization and page ranges.

Citation and Academic Integrity

Why you cite

To give credit for someone else's work and ideasTo let the reader verify your claimTo show where your reasoning sits within the literatureTo distinguish what you found from what you concludedIn-text citation plus a full reference list is the standard structure; this programme uses APA style unless your instructor directs otherwise

Plagiarism

Using another's words, ideas, data or structure without attributionIt includes paraphrasing too closely, reusing your own submitted work without permission, and citing a source you did not readIt also includes text produced by generative tools and presented as your ownCMTCA criterion 3.15 requires programmes to address plagiarism through policy and the student code of conductProfessionally, the equivalent obligation is honesty. The Code of Ethics requires Massage Therapists to conduct themselves with personal and professional integrity at all times.

A Complete Worked Search

The question

In adults with non-specific chronic low back pain (P), does myofascial release (I) compared with usual care (C) reduce pain intensity and disability (O) at twelve weeks (T)?Concept blocksBlock 1: "low back pain" OR lumbago OR "lumbar pain" OR backacheBlock 2: "myofascial release" OR "soft tissue therapy" OR massage OR "manual therapy" OR bodyworkBlock 3: pain OR disability OR function

The search and the screen

String: (Block 1) AND (Block 2) — run Block 3 only if the yield is too largeFilters applied in order: humans; English; last ten years; adults 19+Record the count at each stepScreen titles, then abstracts, then full textsChain forward and backward from the two most relevant papersCheck Cochrane and PEDro separately before concluding that no review exists

When the Search Returns Nothing Useful

First, check the mechanics: spelling, brackets, operators, and whether a filter is doing more than you intendedBroaden the population: search low back pain rather than non-specific chronic low back painBroaden the intervention: search massage rather than one named techniqueDrop the outcome block entirely — outcomes are inconsistently indexedDrop the comparison — comparisons are almost never indexedMove down the hierarchy: if there is no trial, look for a case series, then for expert consensusLook sideways: evidence from physiotherapy, nursing or occupational therapy may transfer with careIf there is genuinely no evidence, say so. "No good evidence was found" is a legitimate and honest finding — and it tells you how to describe the treatment to your client

In-Class Activity 1 — Build and Run a Search

The task (30 minutes, pairs)

Use the PICO question your group wrote in Lecture 1Write out concept blocks with at least four synonyms eachAssemble the full Boolean string with bracketsRun it in PubMed, then in CINAHL; record the result count for eachApply filters one at a time and record the count after eachScreen the first twenty titles and keep the five most relevant

Deliverable

A one-page search log: database, exact string, date, filters, countsFull citations for the five records you keptOne sentence for each on why it was keptOne sentence on which single filter cost you the most relevant recordsKeep this log. Lecture 3 appraises one of these five articles in detail.

Reading a Database Record

What each field tells you

Title and authors — first screen for relevanceJournal, year, volume, pages, DOI — everything needed for a citationAbstract — the second screenPublication type — trial, review, editorial, comment, case report. This is the fastest way to judge designMeSH or subject headings — a free source of synonyms for your next searchAuthor keywords — often better search terms than the ones you invented

Practical use

Find one highly relevant paper, then mine its record for headings and keywords, and re-run the searchThis is called pearl growing, and it is the fastest way to improve a weak searchPublication type filters let you exclude editorials and comments in one stepLinked records — "similar articles", "cited by", "references" — turn one good paper into a reading listA search is iterative. Your first string is a draft, not a result.

Citation Chaining

Two directions, both essential, and neither requires a database subscription.

Backward chaining: read the reference list of a relevant paper to find the work it was built onBackward chaining moves you toward older, foundational literature — including the primary study behind a claim everyone repeatsForward chaining: find papers that have cited this one since it was publishedForward chaining moves you toward newer work, including critiques, replications and retractionsGoogle Scholar, Scopus and Web of Science all offer "cited by" counts and linksA high citation count means a paper is influential, not that it is correct — influential papers are sometimes influential because they are wrongCheck whether a key paper has been retracted or has a published correction before relying on itA strong search combines a database strategy with chaining in both directions from the two or three best papers you find.

Using Google Scholar Well

Strengths

Very broad coverage across disciplines, including theses, conference papers and reportsExcellent for finding a full-text copy of a paper you already know aboutThe "cited by" link is the simplest forward-chaining tool availableThe library links setting connects results to your institutional subscriptionsThe alert function will email you when new work matches your search

Limitations

No controlled vocabulary, so no MeSH searchingLimited filtering: date and rough relevance onlyThe algorithm is not published, so the search is not reproducibleIt indexes predatory journals alongside reputable ones without distinctionIt cannot be reported as a systematic search strategyUse it to supplement PubMed and CINAHL, never to replace them.

Open Access, Paywalls and Getting the Full Text

Gold open access: the final published version is free to all, usually because the authors paid a processing chargeGreen open access: the author deposits an accepted manuscript in a repository, often after an embargoHybrid: a subscription journal in which individual articles have been made openPubMed Central holds free full text for a large body of publicly funded researchThe Directory of Open Access Journals lists vetted open-access titles — a useful filter against predatory publishersYour college library subscription is the primary legitimate route to paywalled material; CMTCA criterion 1.9 requires that access to existInterlibrary loan will obtain articles the library does not hold — ask the librarianEmailing the corresponding author for a copy is normal academic practice and usually worksDo not use pirated article repositories. It is a copyright breach, and the Code of Ethics requires conduct that does not discredit the profession.

Journals in and Around Massage Therapy

Journal	Focus	Access
International Journal of Therapeutic Massage and Bodywork	Massage therapy research, case reports, practice	Open access
Journal of Bodywork and Movement Therapies	Manual and movement therapies	Subscription
Complementary Therapies in Medicine / in Clinical Practice	Complementary and integrative therapies	Subscription
Physical Therapy; Journal of Orthopaedic and Sports Physical Therapy	Rehabilitation, manual therapy, exercise	Mixed
Pain; European Journal of Pain; Journal of Pain	Pain science and pain management	Subscription
BMC Complementary Medicine and Therapies	Complementary medicine research	Open access
Cochrane Database of Systematic Reviews	Systematic reviews across health care	Free in Canada via provincial access

Browsing the tables of contents of two or three of these is a legitimate way to maintain currencyFOMTRAC competency 1.2 t requires you to identify sources of information related to professional practice and to explain why currency matters

Staying Current After Graduation

Practical mechanisms

Save your search in PubMed and set an email alert; new matching papers arrive automaticallySubscribe to table-of-contents alerts from two or three relevant journalsFollow the Cochrane Library for new and updated reviews in your areas of interestRead the CMTO TouchPoint communications for regulatory and practice updatesJoin a journal club, or start one with two colleagues and a monthly articleAttend conferences and read the proceedings even when you cannot attend

Why this is a professional obligation

Code of Ethics, Principle 1 — knowledge and skill must be current and evidence-informedCode of Ethics, Principle 4 — meaningful participation in continuing professional development and self-evaluationFOMTRAC 1.2 t — maintain currency with developments in the professionThe CMTO quality assurance programme asks registrants to demonstrate exactly thisSet the alerts before you graduate. The habit is far harder to start later.

Common Search Errors

The error	The correction
Typing the whole PICO question into the search box as a sentenceUsing AND between synonyms of the same conceptOmitting brackets around OR groupsTruncating too early: pain* or ther*Applying the full-text-available filter firstSearching only one databaseScreening on the abstract’s conclusion rather than its methods	Break it into concept blocks; databases match terms, not questionsUse OR within a concept and AND between conceptsBracket every OR group, or the database will apply AND firstTruncate after the meaningful stem: massag*, not mass*Apply it last, and note how many records it hidRun the same strategy in at least two, and check Cochrane and PEDro separatelyScreen on population, intervention, comparison and design

A Search Strategy Template

Copy this into your notes. Filling it in before you search is the whole discipline of this lecture.

Element	Your entry
Clinical question (PICO)	P: … I: … C: … O: … T: …
Concept block 1 (P)	term OR term OR term OR term
Concept block 2 (I)	term OR term OR term OR term
Concept block 3 (O), optional	term OR term OR term
Full string	(block 1) AND (block 2) AND (block 3)
Databases searched	Cochrane · PubMed · CINAHL · PEDro · other
Filters applied, in order	humans · language · date · age group · design
Results at each stage	unfiltered → after each filter → titles screened → abstracts screened → full texts read → included
Date searched	dd month yyyy

Generative AI Tools and Literature Searching

Where they can help

Suggesting synonyms and alternative terminology for a concept blockExplaining an unfamiliar statistical or methodological term in plain languageSummarizing a paper you have already read, as a check on your own understandingDrafting a plain-language explanation for a client, which you then verify and edit

Where they fail, and the rules

They fabricate citations that look entirely plausible — authors, journals, volumes and DOIs that do not existThey cannot reliably report what a specific paper says unless it is provided to themThey are not a reproducible search strategy and cannot be reported as oneVerify every citation against the database before using it. Open the paperSubmitting AI-generated text as your own work is plagiarism under the student code of conductNever enter client health information into a general-purpose AI tool. That is a disclosure of personal health information and a breach of PHIPA — see Lecture 10.

Searching for Regulatory Information

Where the authority actually lives

Legislation and regulations: ontario.ca/laws — the Massage Therapy Act, 1991, O. Reg. 544/94, the RHPA, the HCCA, PHIPA, the AODAStandards of Practice, Code of Ethics, by-laws, policies and position statements: cmto.comEntry-to-practice competencies: fomtrac.caAccreditation standards: cmtca.caPrivacy guidance: the Information and Privacy Commissioner of OntarioOccupational health and safety: ontario.ca and the Ministry of Labour

How to use them

Always read the primary document, not a summary, a course handout or a social media postCheck the "last updated" date on any standard — the CMTO revises themNote the version you relied on and the date you read itConsolidated legislation on ontario.ca shows the currency date at the top of the pageLectures 7 to 12 are built entirely on these sources. Bookmark them now.

In-Class Activity 2 — Source Reliability Triage

The task (20 minutes, small groups)

Your instructor will distribute six sources on the same clinical topic: a Cochrane review, a small trial, a case report, a textbook chapter, a continuing-education flyer and a clinic blog postRank them on the hierarchy of evidenceApply the CRAAP test to each and record one weakness per sourceDecide which single source you would rely on to answer a client's question, and which you would not cite at all

Debrief prompts

Which source was most persuasive to read? Was it the strongest?How did purpose change your assessment of the flyer and the blog post?What would you tell a client who arrived having read the blog post?Persuasiveness and reliability are unrelated. This is the lesson of the activity.

Summary — Lecture 2

Search

Break the PICO into concept blocks and generate synonyms for eachOR inside a block, AND between blocks, brackets around every OR groupUse truncation, phrase searching and field limits deliberatelyCombine controlled vocabulary with keywords — neither alone is sufficientSearch more than one database; Cochrane and PEDro before general databasesApply filters one at a time and record what each one costs

Judge and record

Apply the CRAAP test: currency, relevance, authority, accuracy, purposeCheck the journal, the author, the funding and the declaration of interestsRecognize predatory journals and refuse to cite themScreen titles, then abstracts, then methods, then resultsDocument the strategy so it can be repeatedCite properly; plagiarism is both an academic and a professional integrity failure

Assessment, Preparation and Homework

How this lecture is assessed

Lecture 2 is examinable on the first course quiz and on the final examinationExpect items requiring you to correct a faulty Boolean string, to identify what a filter would exclude, and to apply the CRAAP test to a described sourceThe search log from Activity 1 feeds directly into the course assignmentApproved assessment scheme: Quiz 1 20%, Quiz 2 20%, Assignment 1 10%, Assignment 2 10%, the Final Examination 30% and Professional Practice and Participation 10%. Pass: 70% overall.

Before Lecture 3

Bring one full-text research article from your search — a randomized controlled trial if you found oneBring your completed search logRead the abstract and the methods section of that article; do not read the discussion yetNote every term in the methods section you could not define

References and Further Reading

Rattray, F., & Ludwig, L. (2000). Clinical Massage Therapy: Understanding, Assessing and Treating Over 70 Conditions. Toronto: Talus Incorporated.Sackett, D. L., Rosenberg, W. M. C., Gray, J. A. M., Haynes, R. B., & Richardson, W. S. (1996). Evidence based medicine: what it is and what it isn't. BMJ, 312(7023), 71–72.Straus, S. E., Glasziou, P., Richardson, W. S., & Haynes, R. B. (2019). Evidence-Based Medicine: How to Practice and Teach It (5th ed.). Elsevier.Andrade, C., & Clifford, P. (2008). Outcome-Based Massage: From Evidence to Practice (2nd ed.). Lippincott Williams & Wilkins.Fritz, S. (2021). Mosby's Fundamentals of Therapeutic Massage (7th ed.). Elsevier.Salvo, S. G. (2023). Massage Therapy: Principles and Practice (7th ed.). Elsevier.Higgins, J. P. T., et al. (Eds.). (2023). Cochrane Handbook for Systematic Reviews of Interventions (Version 6.4). Cochrane.Federation of Massage Therapy Regulatory Authorities of Canada. (2016). Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice.Canadian Massage Therapy Council for Accreditation. (2024). CMTCA Accreditation Standards for Massage Therapy Education Programs in Canada.