PhD in Translational Health Science (THS)

THE GEORGE WASHINGTON UNIVERSITY (GW)
SCHOOL OF MEDICINE AND HEALTH SCIENCES (SMHS)
CLINICAL RESEARCH AND LEADERSHIP (CRL)
Washington, D.C.

Style Guide
For the Written Doctoral Dissertation
This text acts as a guide for PhD in Translational Health Sciences (THS) dissertation defense and preparing for graduation within the Department of Clinical Research and Leadership (CRL) in the School of Medicine and Health Sciences.
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INTRODUCTION

This Style Guide, for the written dissertation for the PhD in Translational Health Sciences, outlines the format for preparing the different sections of the dissertation. It has been adapted from the general guidelines for dissertations at the George Washington University to meet the purposes of the PhD in THS program.

All the front matter (described below) and supplemental materials follow the format and style described below. The content of the chapters is determined in consultation with the dissertation chair and committee members and should be appropriate for the type of study conducted. The formatting of the chapters including margins, page numbering, type face, and order should follow those shown in this guide.

PhD in THS dissertations use the current version of the APA style for all references and citations. Footnotes and endnotes also follow current APA style. You can find APA style guidance here.

A template for the front matter is provided within this document and is also available for download on the PhD in THS website under “Student Resources.”

Preliminary Approval of Dissertation Format

As of Fall 2022, students planning to defend in Spring 2023 and beyond must submit their dissertation for preliminary format review in the semester prior to their dissertation defense. Beginning Spring 2023, students will not be allowed to schedule a dissertation defense if preliminary review of their dissertation has not been completed. A preliminary review takes 3-4 weeks to complete. Students are referred to the Guide to Planning the Dissertation Defense for detailed timelines.

FRONT MATTERS

The front matter of the dissertation for the PhD in THS includes:

- Title Page (Required)
- Certification Page (Required)
- Copyright Page (Optional)
- Dedication (Optional)
- Acknowledgments (Recommended)
- Abstract (Required)
- Table of Contents (Required)
- List of Figures (Required if figures are used)
- List of Tables (Required if tables are used)
- List of Abbreviations (Recommended)
- Glossary of Terms (Optional)

Small screenshots of each component with annotations are provided in the figures below. These are intended as a guide; full details of font size, spacing, etc., can be found here.
Translating Assessments into Practice Using Principles of Patient-Centered Measurement: An Exemplar Using the Coma Recovery Scale-Revised

by Jennifer Ann Craft Weaver

B.S. in Biology, May 2008, California Lutheran University
M.A. in Occupational Therapy, May 2011, University of Southern California

A Dissertation submitted to

The Faculty of
The School of Medicine and Health Sciences
of The George Washington University
in partial fulfillment of the requirements
for the degree of Doctor of Translational Health Sciences

April 26, 2021

Dissertation directed by

Trudy Mallinson, PhD
Associate Professor of Clinical Research and Leadership
Associate Professor of Health, Human Function, and Rehabilitation Sciences

Figure 1: Title Page
The School of Public Health, Division of Health Sciences, of The George Washington University certifies that Jennifer Ann Cran Weaver has passed the Final Examination for the degree of Doctor of Philosophy as of April 26, 2021. This is the final and approved form of the dissertation.

Translating Assessments into Practice Using Principles of Patient-Centered Measurement: An Exemplar Using the Coma Recovery Scale-Revised

Jennifer Ann Cran Weaver

Dissertation Research Committee
Trudy Mallinson, PhD, Associate Professor of Clinical Research and Leadership, Associate Professor of Health, Human Function, and Rehabilitation Sciences, Dissertation Director
Christina Papadimitriou, PhD, Associate Professor of Interdisciplinary Health Sciences and Sociology, Oakland University, Committee Member
Leslie Davidson, PhD, Associate Professor of Health, Human Function, and Rehabilitation Sciences, School of Medicine and Health Sciences, Committee Member
Philip Van der Wees, PhD, Adjunct Professor of Clinical Research and Leadership, The School of Medicine and Health Sciences, Professor of Allied Health Sciences, Radboud Institute of Health Sciences, Committee Member

Dissertation Readers
Noelle Carlozzi, PhD, Professor, School of Medicine, University of Michigan
Ellen Schultz, Senior Researcher, Health Policy Research, American Institutes for Research

Figure 2: Certification Page
Acknowledgements

I would like to thank my research participants, colleagues, mentors, friends, and family.

In addition, I would like to acknowledge and thank...

This page is optional but recommended. It is your chance to acknowledge all the support you have received during your dissertation journey.

Figure 3: Acknowledgement Page
Background: Disorders of consciousness (DoC) include different states (e.g., comatose, vegetative state/unresponsive wakefulness syndrome, minimally conscious state (MCS), and emerging minimally conscious state (eMCS)) following a severe brain injury. Yet, effective communication about treatment of patients with DoC is often inhibited because family caregivers and rehabilitation practitioners do not interpret recovery of consciousness in the same way (Epstein & Street, 2007; Weaver et al., 2018). Because a person may remain in a disordered state of consciousness for as long as two decades and receive multiple episodes of rehabilitation during that time, ensuring clear communication among family caregivers and rehabilitation practitioners about treatment decisions is important (Beaumont & Kenealy, 2005). Incorporating person-centered measurement principles (American Institutes for Research, 2017) into how assessment results are shared between and within key stakeholders, rehabilitation practitioners, and family caregivers, may facilitate shared treatment decision-making (SDM). SDM is the process in which both family caregivers and rehabilitation practitioners share clinical data and personal values to arrive at a mutual treatment decision (Elwyn et al., 2016; Papadimitriou et al., 2020).

Objective: The long-term objective of this research is to facilitate shared decision making in treatment planning between rehabilitation practitioners and the family caregivers of individuals with DoC following a severe brain injury. The purpose of this research is to create a recovery ruler that facilitates effective communication about assessment results.
Assessing Pre-Exposure Prophylaxis Screening and Need among Men Who Have Sex with Men and Transgender Persons of Color: A Mixed Methods Case Study of the IMPACT DMV Demonstration Project.

Men who have sex with men (MSM) and transgender persons of color experience disproportionate, multi-level HIV risks. Pre-exposure prophylaxis (PrEP) is an evidence-based HIV prevention strategy; however, access to PrEP has been limited among this population. PrEP demonstration projects that target MSM and transgender persons and test the implementation of PrEP in real-world settings are underway. However, PrEP demonstration projects specific to MSM and transgender persons of color are limited and most demonstration projects do not consider the impact of the implementation process or organization contextual characteristics on PrEP outcomes. The Improve Measurable Participation and Access to Care and Treatment District of Columbia, Maryland, and Virginia (IMPACT DMV) demonstration project was created in response to the high rates of HIV, AIDS, and STIs among MSM and transgender persons of color in the DC, Maryland, and Virginia region aimed to provide equitable access to HIV prevention, care and treatment, and support services for those populations. Using a mixed-methods case study design, this study sought to describe PrEP screening and PrEP need in the overall project, understand how the project was implemented at the clinic level with respect to PrEP screening and determination of PrEP need, and describe how the varying contexts and implementation strategies of the clinics impacted PrEP screening and PrEP need in the overall project.

An implementation science framework guided the study’s exploration of PrEP.
List of Abbreviations

AAMC: Association of American Medical Colleges
AHRQ: Agency for Healthcare Research and Quality
APA: American Psychological Association
ART: Antiretroviral Therapy
ATLPS: Attitudes toward LGBT Patients Scale
BMI: Body Mass Index
CFSE: Consolidated Framework for Implementation Research
DSD: Disorders of Sex Development or intersex
FtM: Female-to-male transgender person or trans male
GAPS: Gay Affirming Practice Scale
GLMA: Gay and Lesbian Medical Association
GW: The George Washington University
HIV: Human Immunodeficiency Virus
HEI: Healthcare Equality Index
HRC: Human Rights Campaign
HHS: Health and Human Services
IOM: Institute of Medicine
LGBT-DOCSS: LGBT Development of Clinical Skills Scale
LGBTQI: Lesbian, gay, bisexual, transgender, queer and intersex
MAP: Movement Advancement Project

Figure 7: List of Abbreviations

Reminder:
These images are provided as a guide to help with formatting different sections of the dissertation for the PhD in THS. Not all aspects of all images follow the correct format.

Information regarding type face, font size, margins, order of sections can be found on the University website.

Other student dissertations available at Himmelfarb Health Sciences Research Commons maybe a useful source of information regarding content of sections but should not be relied on as a style guide.
MAIN BODY OF THE DISSERTATION

All information regarding type face, font size, margins, order of sections can be found on the University website.

The main body of the dissertation consists of Chapters 1 through 5 and References.

All citations and references follow current APA style guidelines.

Supplemental materials such as interview guides, assessment score sheets, transcripts, consent forms, other informational material provided to study participants, supplemental figures and tables are provided in the appendices in the order in which they are referred to in the main chapters.

The table that follows provides general guidance on the content of the five dissertation chapters relative to the overall chapter structure provided by GW. Students, in collaboration with their dissertation committee, may choose to include published and/or publishable material within the content of their chapters. Guidance for how manuscripts (either published, submitted for publication, or to be submitted in the future) are to be included within the body of the chapter(s) is provided in the table.

Each manuscript, regardless of whether it has been submitted for publication or not, should be accompanied by a foreword and afterword. The foreword places the manuscript in context relative to the dissertation study questions, highlights any relevant issues to the reader, describes the status of the manuscript including journal(s) it may have been submitted to or plans for future submission. The afterword briefly describes any feedback from reviewers, revisions made as a result of the feedback or other lessons learned from the submission process.

Manuscripts will generally be placed in Chapter 2 as a scoping or systematic review and/or in Chapter 4 as description of study results. Students may include one manuscript in Chapter 2 and/or one manuscript in Chapter 3 and/or at least one but not more than three manuscripts in Chapter 4. In general, students should not plan to include more than four manuscripts total within the dissertation.
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**Chapter 1: Introduction [or Your Heading]**

Examples:
- *Introduction, Purpose, and Theoretical Framework*

Chapter generally includes:
- Purpose statement, Background & Significance of Study, including the translational nature of the work, Theoretical/Conceptual Framework, Research Aims, Limitations, Definition of Terms, Assumptions, Summary

**Chapter 2: Literature Review [or Your Heading]**

Examples:
- *Review of Literature*
- *Literature Review Including Systematic Review*

Chapter generally includes:
- Methods of identifying literature, review of literature relative to content area, translational science, theoretical model(s), conceptual model(s) used in the proposed study, implications for proposed study

**Chapter 1: Introduction [or Your Heading]**

Examples:
- *Introduction, Purpose, and Theoretical Framework*

Chapter generally includes:
- Purpose statement, Background & Significance of Study, including the translational nature of the work, Theoretical/Conceptual Framework, Research Aims, Limitations, Definition of Terms, Assumptions, Summary

**Chapter 2: Literature Review [or Your Heading]**

Examples:
- *Review of Literature*
- *Literature Review Including Systematic Review*

Chapter generally includes:
- a) Includes introduction to the published literature review, translational sciences focus, role of literature in framing the empirical methods of the proposed study, conceptual model(s) used in the proposed study, and
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**Chapter 3: Methods [or Your Heading]**

Examples:
- Research Methods & Study Design
- Methods and Methodology

Chapter generally includes:
Overview of methodological approach including alignment with conceptual model and translational science foci, research questions, study design, qualitative and quantitative methods including data collection and data analysis, mixed methods and approach to data triangulation, ethical considerations, and human subjects’ participation,

**Chapter 4: Results [or Your Heading]**

Chapter generally includes:
The order of presenting results will depend on the

**Chapter 3: Methods [or Your Heading]**

Examples:
- Research Methods & Study Design
- Methods and Methodology

Chapter generally includes:
Overview of methodological approach including alignment with conceptual model and translational science foci, research questions, study design, qualitative and quantitative methods including data collection and data analysis, mixed methods and approach to data triangulation, ethical considerations, and human subjects’ participation,

This chapter serves as a detailed overview of methods that will be discussed in the manuscripts in Chapter 4.

A manuscript describing a novel method or revision to an established method may be included along with a foreword and afterword.

**Chapter 4: Results [or Your Heading]**

Chapter generally includes:
The order of presenting results will depend on the

This chapter will include study results in a published
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<td>nature of the research conducted. In general, provide a summary overview/introduction and organize reporting of results to align with order of analysis presented in chapter 3. This may not always be feasible or appropriate and will determined in collaboration with your committee. How the results address the dissertation’s main research questions should be clear.</td>
<td>or publishable format (e.g., manuscripts). Students should include two (but not more than three) manuscripts or other published or publishable material. Material does not need to be submitted for publication but if it has been, student should follow guidance found at: <a href="https://library.gwu.edu/etd/previously_pubd_works">https://library.gwu.edu/etd/previously_pubd_works</a></td>
<td>Each manuscript should be accompanied by a foreword and afterword which provide context for the reader and briefly describe where the manuscript sits in relationship to the dissertation translational research question(s). The afterword should provide brief reflection on the findings, lessons learned, and considerations for revision or submission for publication. The pre-publication version, formatted per GW standards, should be included. At least one of the manuscripts should address knowledge translation or implementation of knowledge.</td>
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FAQs: INCLUDING PUBLISHED/PUBLISHABLE MATERIAL WITHIN THE DISSERTATION

What does “published or publishable material” mean?
Students may include material that has been peer-reviewed and/or published in a journal or other format prior to the dissertation defense. To be considered for inclusion, such material must have gone through some form of thorough peer review. This may include review by peers selected by a journal or review of representatives of a public agency (such as the Federal Drug Administration, Centers for Medicare and Medicaid Services, etc.). Reviews may be blinded or unblinded, but reviewers should have no perceived conflict of interest with the student, dissertation chair, or committee members.

Publishable material is content that has either been submitted for peer-review and returned for revisions, or which has not been submitted for publication but that would, in the judgement of the dissertation chair, committee, and external readers, pass peer review at a later time.

Who decides what published or publishable material to include within the dissertation?
The student, dissertation chair, and committee members collaborate to decide the content of the written dissertation.

Does all the content need to be published at the time of dissertation defense?
No, but at least one document (most likely the literature review) must at least be under peer review prior to scheduling the dissertation defense.

What is the latest time at which the student and the committee need to determine if published/publishable material will be included?
Ideally, this decision will be made at the time of proposal defense. For students in earlier cohorts who have already defended their proposals, they may confer with their chair and committee members and determine the appropriate content of their dissertation. Whether the dissertation will include published/publishable material is determined by the student and dissertation committee and does not need to be approved by the directors of the PhD program.

When will this guidance take effect?
Immediately. Students who have already successfully defended their dissertation proposal may, in consultation with their chair and committee members, elect to include published/publishable material within their dissertation. Students may also choose, in consultation with their chairs and committee members, continue with the format agree to at their proposal defense. Students who have already defended their proposal may collaborate with their chair and committee to consider the student’s career goals, writing proficiency, and proximity to scheduling the dissertation defense in deciding whether to include published/publishable material within the dissertation chapters. Students in Cohorts 4 and 5 will collaborate with their chairs and committee on this format following successful proposal defense.

How is authorship of the materials decided?
The student, dissertation chair, and committee members will collaborate to determine authorship. In general, the student will be first (and communicating) author on each of the materials and the dissertation chair will be last (senior) author, but this should be determined as appropriate by discipline. Other committee members and collaborators may be included as appropriate. Nothing in these comments should be read as excluding other key stakeholders from acting as co-authors. See more details in the section on copyright.
How long should these materials be?
There are no specific recommendations set for these published/publishable materials. However, collectively the materials will, in the opinion of the chair, committee, and external readers, contain as much substantive information as usually expected in a doctoral dissertation. In addition, these materials do not stand alone; rather they are embedded within the usual dissertation chapters, with relevant forewords, afterwords, and any additional materials the chair deems, that place the findings in context of the overall dissertation questions.
Chapter 2

Chapter 2 - no manuscript

Chapter 2: Review of the Literature

Introduction

This literature review aims to describe the available literature related to drug development and FDA benefit-risk assessment for a new drug product. The Science-of-Science, cross-disciplinary research, and collaborative cross-disciplinary integration. The literature on drug development and FDA new drug product review provides important contextual information for the application of theories and frameworks from the Science-of-Science research on collaborative cross-disciplinary integration. The review of literature from the Science-of-Science explains the ongoing approach to measuring or studying collaborative cross-disciplinary research and the specific phenomenon of collaborative cross-disciplinary research, integration, and its impact on the field of Science-of-Science. Literature on the phenomenon of cross-disciplinary integration is presented to identify the current state of research on the matter, gaps in existing evidence, and elicit the most appropriate tools or methods to study integration in this context.

Literature searches to inform the review of each domain use a combination of key terms and wildcards and are conducted across multiple databases to ensure adequate breadth of search, including Scopus, CINAHL, PubMed, and Medline. Searches were limited to English language publications, but the year range was not limited due to the paucity of research found initially in these domains. In addition, searches are included for literature related to the FDA new drug product review including searching federal websites and regulatory documents. Search methods and keywords are listed in Table 1, below.
Title page of manuscript as it was/would be formatted for submission, followed by abstract and rest of manuscript
Chapter 3 Methods

Overview of Methodology

As discussed previously, while integration is a desired outcome in FDA’s new integrated assessment approach, how this integration occurs is unknown. The Science-of-Team-Science offers some insight into how pragmatic and contextual integration within FDA activity, using a contextually focused case study methodology by Creswell and Poth (2016) enables comparisons of how integration occurs between review and to understand the phenomena. This qualitative approach allows for the examination of a process that occurs between review and to understand the case study design allowing for the examination of how phenomena approach design allows for the pragmatic and contextual integration within FDA activity, using a contextually focused case study methodology by Creswell and Poth (2016). In the case study design allowing for the analysis in two cases to examine research questions are:

1. What are examples of an “integrated review” of an FDA
   2. What are the specific examples of an “integrated review” of an FDA

Chapter 3: Methodology

Introduction

Informed by the Knowledge to Action framework for implementation of new and evolving clinical approaches, this mixed methods research project was divided into exploratory and design phases. Throughout, the project used a pragmatic approach to ensure the recovery ruler is feasible for future adoption into clinical practice. Each research phase had unique considerations for data management procedures to ensure quality, integrity, confidentiality, and accuracy.

Phase one involved examination of the kinds of treatments available in the literature for practitioners and family caregivers to choose among, the process by which practitioners and caregivers currently discuss treatments and conduct micro-decisionmaking, and the examination of the most widely used neurobehavioral functional assessment, the CRS-R, for its accuracy and precision. A scoping review analyzed studies that included rehabilitation-focused interventions to understand the evidence available for treatment decision-making in patients in COVID. The qualitative study used observations in the field and semi-structured interviews to provide insight into how rehabilitation practitioners and caregivers plan and execute treatments. The quantitative study analyzed the CRS-R for its psychometric properties and item hierarchy that could inform development of the recovery ruler.

Phase two involved the design of a shared decision-making tool prototype using a pragmatic, experimental mixed methods approach to incorporate the perspectives of the rehabilitation practitioners and family caregivers. The goal of this second phase was to develop a tool that provided intuitive CRS-R assessment results that aligned to states of...
This study was a phenomenological descriptive case study of the regulatory review of a new drug product marketing application that used either the traditional approach to the review (i.e., multidisciplinary review) or the new integrated approach (i.e., interdisciplinary review) at the FDA. The purpose of benefit-risk reviews was, if any, and integration process. The study employed interviews, and member checking or centered around the collaborative teams. Data collection and analysis of integration from O’Rourke et al. (2019). In 2019 the FDA assessment of marketing applications (Woodcock et al., 2020). This chapter presents the results from the three primary research objectives of this project that broadly were described to inform shared decision-making, psychological properties of the Coma Recovery Scale-Revised, and the development of a recovery ruler to facilitate shared decision-making between family caregivers and rehabilitation practitioners when treatment planning. The initial primary objective was to describe the barriers and facilitators of the shared decision-making process for family caregivers and rehabilitation practitioners when treatment planning for a person with disorders of consciousness. An initial consultation, this initial application of an initial model of shared decision-making that included using the OPTION-5 to evaluate in what context shared decision-making occurred when treatment planning. However, in the course of investigation, it became evident that treatment decisions in rehabilitation were extensive and occurred in the moment. Multiple treatment decisions were made within one rehabilitation encounter and the treatment decisions always required deliberations about risks and benefits. Therefore, using tools like the OPTION-5, we evaluate shared decision-making with components such as deliberations about the risks and benefits of a treatment, e.g., whether or not to use a CT to diagnose acute abdominal pain (Jag et al., 2018), were not feasible for evaluating shared decision-making that occurred as part of the patient's treatment in rehabilitation practice.

During this exploratory work that included interviews and observations and interviewing family caregivers and rehabilitation practitioners, it became clear that addressing the first primary objective required taking a step back to reassess how
Introduction

Cross-disciplinary integration is a key feature of interdisciplinary research and the collaborative form is often a desired outcome of team science (Skinner, 2013; Klein, 2012; O’Rourke et al., 2013). In 2019, the FDA sought to increase integration in its new drug product marketing application reviews with the implementation of the new interdisciplinary assessment process and interventional review discussion (Woodcock et al., 2019). The FDA’s intention was to "identify", often multidisciplinary, this case study approach to cross-disciplinary integration (Thompson et al., 2016). Such efforts have often been unable to bring together outputs of cross-disciplinary, process-focused work (D值ke et al., 2016). This chapter includes a summary of key findings from each study nested within the greater research project, discussion of the conceptual frameworks that informed design and execution of the project, reflection on the translational nature of the project, and implications of the findings for theory, research, and clinical practice. The chapter concludes with a discussion of the limitations of the project, recommendations, and an overall conclusion.

Summary of Key Findings

Research Question 1: How do family caregivers and rehabilitation practitioners make decisions when treatment planning for a person with disorders of consciousness?

Research Question 2: What are the underlying psychometric properties of the Coma Recovery Scale-Revised, including step and item calibrations, measurement precision (e.g., reliability), and hierarchical item order?

Figure 12: Chapter 5 Examples

Reminder:

Chapters 3, 4, and 5 all follow the examples and style provided in Chapters 1 and 2. All formatting, font, typeface, margins, spacing, and headings should be consistent throughout the dissertation.
**HEADINGS**

Follow current [APA style](https://apastyle.apa.org/) for headings throughout the main body of the dissertation.

Follow APA format for size, typeface, justification of headings. Please note that APA style has five heading levels, plan accordingly.

**Level 1** uses text that is center-justified, bold, with each major word starting with a capital letter. The heading is double-spaced, and the paragraph text begins on a new line.

**Level 2** uses text that is left-justified, bold, and each major word starting with a capital letter. The heading is double-spaced, and the paragraph begins on a new line.

**Level 3** uses text that is left-justified, bold, italicized, with each major word starting with a capital letter. The heading is double-spaced, and the paragraph text begins on a new line.

**Level 4** uses text that is indented, left-justified, bold, with each major word starting with a capital letter; the heading ends with a bolded period. The heading is double-spaced, and the paragraph text follows directly after the bolded period.

**Level 5** uses text that is indented, left-justified, bold, italicized, with each major word starting with a capital letter; the heading ends with a bolded, italicized period. The heading is double-spaced, and the paragraph text follows directly after the bolded, italicized period.

This is an Example of a Level One Heading

The text that follows a level one heading is indented on the first line, left side justified and double-spaced.

**This is an Example of a Level Two Heading**

The text that follows a level two heading is indented on the first line, left side justified and double-spaced.

**This is an Example of a Level Three Heading**

The text that follows a level three heading is indented on the first line, left side justified and double-spaced.

**This is an Example of a Level Four Heading.** The text that follows a level four heading is on the same line as the heading, left side justified and double-spaced.

**This is an Example of a Level Five Heading.** The text that follows a level five heading is on the same
transcripts, a new research sub-question emerged—How are capstones shaped by faculty perspectives?—which was reflected in the second theme. The second research question, How can KT be promoted in entry-level OTD capstone? emerged as part of Theme 3. Research questions cannot be fully understood by an analysis of their parts, rather, there is a need to understand the whole and the relationships among those parts (Bleichley & Cleland, 2015). This final section serves to summarize the main findings in reference to the research questions.

**How Is Knowledge Translation Reflected in Capstones?**

Some foundational concepts of KT were reflected in the capstone documents as well as faculty interviews. These included problem identification, adapting knowledge to local context, assessing barriers and facilitators to knowledge use, and stakeholder engagement. Other KT concepts were minimally reflected or nonexistent. Those included selecting, tailoring, and implementing interventions, sustaining knowledge use, evaluating knowledge outcomes, and monitoring knowledge use.

**TABLES AND FIGURES**

Tables and figures should be numbered consecutively throughout the document and follow current APA style and format. Numbering may refer to the chapter number, for example, Table 3.9 would refer to the ninth table in chapter 3. The preferred style is Table and number, table title, and then table, each with one single line between (Figure 4.1 below is not the preferred style).
Table 9

Estimate Number of Patients with PCOS Annually

<table>
<thead>
<tr>
<th>Number of patients</th>
<th>Pediatric focused practice</th>
<th>Family medicine focused practice</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>&lt;25</td>
<td>10</td>
<td>22.7</td>
<td>26</td>
</tr>
<tr>
<td>25-50</td>
<td>3</td>
<td>6.8</td>
<td>3</td>
</tr>
<tr>
<td>&gt;75</td>
<td>1</td>
<td>2.3</td>
<td>1</td>
</tr>
</tbody>
</table>

Figure 4.1
Interrelationships Among Study Themes

Themes and Interrelationships
Following exploration of faculty perceptions and institutional documents, findings suggest clear opportunities to promote KT in contexts with increased faculty awareness and curricular support.

Figure 14: Table Example #1
Table titles that exceed one line are single spaced. Follow APA format for footnotes and abbreviations, including p-values.

Unlike APA style manual, tables should not be double-spaced but instead should be single spaced. Figures and tables always fit within the specified page margins.

Text in figures and tables are at least 8-point font. Colors may be used but should not distract from the readability of the text. If using dark colors, change text to white for maximum contrast.

Figure 15: Table Example #2
QUALITATIVE DATA AND QUOTATIONS

Direct quotes from study participants are set apart and single spaced. APA guidance suggests quotes longer than 40 words are set apart and single spaced. The use sub-headings should provide additional or clarifying information for the reader. Although you may “anonymize” quotes, all quotes should be attributable to an individual. Italicizing quotes is optional.

Figure 16: Qualitative Data and Quotations

All thumbnails in this guide are from the dissertations of students who have graduated from the PhD in THS and can be found at Himmelfarb Health Sciences Research Commons.
APPENDICES

The content of appendices is largely dependent on the specific details of the study undertaken. As a general rule, err on the side of sharing more, rather than less, information. At a minimum, appendices should include a copy of the IRB approval (or the letter stating that the study is exempt), any consent/assent forms, and a list of dissemination materials produced related to the dissertation such as meeting abstracts, posters.

Data collection forms are included if these are original to the dissertation study. Do not include materials copyrighted by others in the appendices. Appendices are not required to follow the strict formatting guidelines of the body of the dissertation; however, they should be readable and legible.

Appendices begin with a title page that lists the name of each appendix in the order in which they appear in the text. This is also the order in which they appear in the appendices.
OTHER CONSIDERATIONS

Fair use of text and figures

Fair use refers to using materials (such as tables, figures, text) in your own work that were created by others. For example, you may wish to include a copy of an image of the CFIR model within your dissertation. In general, make limited and judicious use of other’s materials, and when you do, cite that material appropriately. Whenever possible, request use from the copyright holder. In the case that you need to modify a figure to reflect the nuances of your own study, careful reference to original sources is required.

If you have questions about including material from other sources within you dissertation, please contact a GW librarian. GW Libraries has additional information regarding fair use and copyright issues that you are responsible for reading here.

If you publish part of your dissertation before final deposit of the written dissertation in Himmelfarb Research Commons, you may have given up rights to material. This will vary by journal and students, chairs, and committee should check on this issue at the time of submission to the journal. In general, journals have policies regarding use of pre-publication versions. Students including published manuscripts will generally include the pre-publication version approved by the relevant journal. Use Sherpa-Romeo for guidance.

Academic Honesty and Integrity

Students in the PhD in THS program are taught how to correctly cite and avoid plagiarism during orientation and each subsequent semester, the University policy regarding plagiarism is documented in course syllabi. As you move from the didactic portion of the program to the dissertation phase, it is equally important that you do not plagiarize others’ work within your dissertation. For University guidance on plagiarism refer to the following website.

Academic honesty and integrity in the doctoral dissertation go beyond the written text. As a collaborative activity that reflects the principles of team science, the doctoral dissertation should reflect honest acknowledgement of the work done by the student/candidate and the work done by others including, but not limited to, the dissertation chair and committee members, and readers. Other individuals whose contributions should be fully acknowledged include those providing methodological support (e.g., statisticians, qualitative coding experts), access to and/or recruitment of study participants, access to secondary data, logistical support, and writing/editing services. The acknowledgements page is an important venue for providing full and clear credit for materials, intellectual contributions, and time and effort that substantively contributed to the work of the dissertation research and written dissertation.

Acknowledging receipt of grant, award, or other funding to directly support the dissertation work is required.

Writing/Editing services

Students who require support with editing and formatting their dissertation may choose to hire a consultant for such purposes. Students are reminded of the high standards for academic honesty to which the program holds students and that ‘ghost’ writing of dissertations or even substantive re-writing of material by an editor will not be tolerated.
FORMAT APPROVAL

Review Process

Initial review of the dissertation format occurs in the semester prior to the dissertation defense. Request a preliminary dissertation format review from the Director of Doctoral Research. When requesting a preliminary review, both the candidate and the dissertation chair should state that every good faith effort has been made to align the written dissertation to this style guide. Revisions and feedback are expected, but submission of a dissertation with little effort to follow the style guide will be summarily returned. This may delay dissertation defense. The dissertation defense may not be scheduled without an approved preliminary review of your written dissertation. Plan on at least 3-4 weeks to receive comments and feedback on your dissertation format.

Review Submission Requirements

For the preliminary review, you will need to submit the title page, all front matter, chapters 1 and 2, references, and appendices, in PDF format. While these materials may not be in final form and/or entirely complete, they should be formatted in compliance with the style guide and include as much material as you have at the time of submission.

Review Summary Form

The review summary form will provide feedback on necessary revisions to the format that need to be made before final review. The review will provide feedback on the following areas:

- Margins
- Font/Typeface
- Headings
- Line spacing, Indents, and Alignment
- Paragraph Spacing
- Headers, Footers, and Page Numbering
- Table of Contents

Not every instance of a needed correction will be detailed. It is the student’s responsibility to make needed changes throughout the document.

Final Summary Review

Prior to depositing the dissertation in Himmelfarb Research Commons, the student must receive final approval of the written dissertation from the program. Himmelfarb librarians will not upload a dissertation without form CP5: Final Approval of the Written Dissertation. Please allow at least one week for final review. The review may not be initiated until after form CP4: Final Approval of Dissertation Revisions is signed and filed.
TIMELINES AND GRADUATION

Dissertation Review, defense, and deposit timeline and deadlines

For a detailed presentation of timelines, students are referred to the Guide to Planning the Dissertation Defense. Students are advised that final dates vary by semester of graduation. Latest dates for request final review are:

- Spring Graduation: Friday, 3rd week April
- Summer Graduation: Friday, 1st week August
- Fall Graduation: Friday, 2nd week November

Depositing the dissertation in HS Research Commons

Students must deposit the final approved version of their written dissertation to Himmelfarb Research Commons and the entry must be visible to the Director of Doctoral Research before clearance for graduation is provided.

Answers to many questions related to Research Commons are available at the following website. Students should consult with the Metadata and Scholarly Publishing Librarian, at hsrc@gwu.edu for more details about the submission process.

Copyright and Embargoing and Open Access Policy

Students who plan to publish their work in the years after dissertation defense may choose to embargo their dissertation for up to three years. You may not embargo your work for longer than three years. Depositing the dissertation to Research Commons does not constitute publishing and students may publish with their collaborators in the future. As of July 2022, the PhD in THS program does not have a policy regarding Open Access of data from student dissertations.
Frequently Asked Questions (FAQS)

How early can I submit a draft of my written dissertation for format review?
You can submit your preliminary components of your written dissertation for format review as soon as you are able after successful proposal defense. You do not need to wait until the latest date provided on the Gantt chart. In fact, the program recommends you submit your written dissertation for format review as early as possible.

When does the program do a final review of my written dissertation?
The program conducts a final review and approval of written dissertation format after final approval is provided by the chair/committee.

Can I schedule my dissertation defense date (future), at the same time I submit my draft for review?
We recommend that you submit your written dissertation well in advance of planning your dissertation defense. You can submit the draft sections of your written dissertation any time after your proposal defense. The dates provided on the Gantt chart are the absolute latest by which the program can reasonably support graduation in the desired semester.

How final must the draft be that is submitted for pre-review?
The draft must include the relevant components listed in the style guide. You may submit your written dissertation draft any time after your successful proposal defense. Please remember, as stated in the style guide, you must have made a good faith effort to follow the style guide before submitting it for program review.

Can I have someone format my written dissertation for me?
Students are welcome to provide this style guide to an editor to format their written dissertation. The program does not provide financial support for formatting and students considering using an editor will need to locate and pay for those services on their own. Remember that the program has high standards for academic integrity and editors may not be hired to write the content of the dissertation.
APPENDICES

Summary Review Form
This is a sample of the type of format feedback the student will be provided. Actual form may vary from the example provided.

Dissertation Page Templates
These pages are for review only. Students should download the template pages provided on the program website.
<table>
<thead>
<tr>
<th>Topic</th>
<th>Comment</th>
<th>Page</th>
</tr>
</thead>
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<tr>
<td>Font size</td>
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<tr>
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</table>

Additional comments:
Manuscript Title

By: Student Name

Degree e.g., B.S. in discipline, month, year, University
Degree e.g., M.S. in discipline, month, year, University

A Dissertation submitted to

The Faculty of
The School of Medicine and Health Sciences
of the George Washington University
in partial fulfillment of the requirements
for the degree of Doctor of Translational Health Sciences

Date of your dissertation defense (e.g., April 5, 2022)

Dissertation directed by

Chair Name, Credentials
Title and
Department
The School of Medicine and Health Sciences of the George Washington University certifies that student full name has passed the Final Examination for the degree of Doctor of Philosophy as of date of defense. This is the final and approved form of the dissertation.

Dissertation Title

Student Name

Dissertation Research Committee

Name, degree, title, department, role of chair and committee members
Name, degree, title, department, role of chair and committee members
Name, degree, title, department, role of chair and committee members
Name, degree, title, department, role of chair and committee members

Dissertation Readers

Name, degree, title, institution, of your readers
Name, degree, title, institution, of your readers
Acknowledgements

I would like to thank my research participants, colleagues, mentors, friends, and family.

In addition, I would like to acknowledge and thank...
Abstract

Dissertation Title

**Background:** Insert background information here. Text here is indented on the first line of the paragraph with the paragraph title in bold.

**Objective:** Insert objective here. Text here is indented on the first line of the paragraph with the paragraph title in bold.
Abstract

Dissertation Title

Insert unstructured abstract here. Paragraphs in this section are indented and do not have paragraph titles.
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  Significance of the Study ........................................................................................................ Error! Bookmark not defined.
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No table of figures entries found.
List of Tables

No table of figures entries found.
List of Abbreviations

Insert Abbreviations
Chapter 1: Introduction (or your heading)

First section e.g., Background or Introduction

The text in the chapters of the dissertation is double-spaced, with the first line of each paragraph indented. Titles throughout the chapters are left justified, may be bold or italics but must be consistent throughout the text. Details regarding the different levels of headings are described in the style guide.
Chapter 2: Literature Review (or your heading)

First section

The text in the chapters of the dissertation is double-spaced, with the first line of each paragraph indented. Titles throughout the chapters are left justified, may be bold or italics but must be consistent throughout the text. Details regarding the different levels of headings are described in the style guide.
Chapter 3: *Methods (or your heading)*

First section

The text in the chapters of the dissertation is double-spaced, with the first line of each paragraph indented. Titles throughout the chapters are left justified, may be bold or italics but must be consistent throughout the text. Details regarding the different levels of headings are described in the style guide.
Chapter 4: Results (or your heading)

First section

The text in the chapters of the dissertation is double-spaced, with the first line of each paragraph indented. Titles throughout the chapters are left justified, may be bold or italics but must be consistent throughout the text. Details regarding the different levels of headings are described in the style guide.
Chapter 5: Discussion, Conclusion (or your heading)

First section

The text in the chapters of the dissertation is double-spaced, with the first line of each paragraph indented. Titles throughout the chapters are left justified, may be bold or italics but must be consistent throughout the text. Details regarding the different levels of headings are described in the style guide.
References
Appendices