

# Accepted manuscripts meet more criteria for research reporting

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[type](#), the difference was not observed. Among all manuscript categories, poor reporting was seen for objectives, study size, missing data, study participants, and translation of risk. In addition, poor reporting for eligibility criteria, variables, bias and confounding, statistical methods, unadjusted and adjusted estimates, and category boundaries was seen in rejected manuscripts.

"Overall, accepted manuscripts show better adherence to the STROBE checklist, but there are several critical items that are poorly reported in all [manuscripts](#)," the authors write.

**More information:** [Abstract/Full Text](#)  
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(HealthDay)—Accepted manuscripts for observational studies have better adherence to the Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) checklist compared with rejected manuscripts, according to research published in the August issue of *Obstetrics & Gynecology*.

April D. Adams, M.D., from the Medstar Washington Hospital Center in Washington, D.C., and colleagues developed a scoring system based on the STROBE [checklist](#); volunteer medical students or doctors validated it for consistency. A cross-sectional analysis of 198 observational research manuscripts submitted to *Obstetrics & Gynecology* was performed using this scoring system, and each manuscript was scored based on the STROBE checklist.

The researchers found a statistically significant difference between the mean score for accepted and rejected manuscripts ( $23.2 \pm 2.7$  versus  $19.7 \pm 4.1$ ). When comparing country of origin and [study](#)

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