

<b>Reviewer ID:</b> Gita Manhas, Risa Fox			
<b>Type of Outcome Measure:</b> Spinal Cord Ability Ruler: interval scale to measure volitional performance after SCI			<b>Total articles:</b> 1
<b>Author ID Year</b>	<b>Study Design</b>	<b>Setting</b>	<b>Population (sample size, age) and Group</b>
Reed et al. 2017	Retrospective statistical analysis of database; purpose is to design the validated interval-linear scale to enable more inclusive enrollment of participants in SCI clinical trials	Extraction of de-identified data from European Multicenter study about SCI (EMSCI) database.  Collected July 2001 – December 2015.	Final scale metrics included: 7518 records from 2777 participants  45% tetraplegic; 55% paraplegic individuals Severity: AIS A (45%); B (13%); C (17%); D (24%); E (1%)  79% Male participants Age at injury ranged from 13-94.
<b>1. RELIABILITY</b>			
<b>Author ID</b>	<b>Internal Consistency</b>	<b>Test-retest, Inter-rater, Intra-rater</b>	
Reed et al. 2017	PSI (measure analogous to Cronbach's alpha) = 0.97 (out of 1)	No data available.	
<b>2. VALIDITY</b>			
<b>Author ID</b>	<b>Validity</b>		
Reed et al. 2017	As SCAR was determined to be an interval-level scale and Rasch analysis was used to create a total score for each participant, it is legitimate to combine each participant's score and the difficulty rating of the item on the same scale to inspect scale-to-sample targeting. Beyond targeting, Rasch analysis highlights the strengths and limitations of a scale by demonstrating that items and response options map out along a proper hierarchical "more than/less than" structure so that intensity of the attribute can always be estimated along a linear continuum.		
<b>3. RESPONSIVENESS</b> <input type="checkbox"/> no data available			
<b>4. FLOOR/CEILING EFFECT</b>			
<b>Author ID</b>	<b>Floor/Ceiling Effect</b>		
Reed et al. 2017	Ceiling effects of 3% Floor effects of 2.4% observed in the data set.		
<b>5. INTERPRETABILITY</b> <input type="checkbox"/> no data available			