Table 2. Research design, level of evidence, and methodological evaluation for treatment outcome studies generated

			Desirable Features of Treatment Studies in Oral-Pharyngeal Dysphagia2			
Reference	Design	Level of Evidence	Objective Assessment	Standardized Assessment Procedures	Group Homogeneity	Treatment protocol
Shaker et al. (2002)	3 Randomized Controlled trial PEDro–P scale rating = 6/10	Level 2	YES Videofluoroscopy	YES Assessment procedure well described	NO Chronic and acute patients with various etiologies of dysphagia BUT same disordered aspect of swallow (reduced UES opening)	YES Treatment protocol clearly described
Logemann et al. (1989)	Case Series	Level 4	YES Videofluoroscopy	YES Assessment procedure well described	YES 5 individuals with chronic dysphagia post LMI Also 6 health controls	YES Single intervention of head-turn strategy
Crary (1995)	Case Series	Level 4	YES Videofluoroscopy	NO Post treatment assessment procedures not standardized or systematically reported	YES 6 individuals with chronic post stroke dysphagia resulting from brainstem stroke > 5MPO	YES Treatment protocol clearly described
Huckabee & Cannito (1999)	Case Series	Level 4	YES Videofluoroscopy	YES Assessment procedure well described	YES 10 participants with chronic post stroke dysphagia secondary to brainstem stroke or surgery > 8MPO	YES Treatment protocol clearly described
Tsukamoto (2000)	Case Study	Not rated	YES Videofluoroscopy Computed tomography	NO Not described	NA	NA Assessment only
Kanai et al. (2009)	Case study	Not rated	YES Scinigraphy	NO Assessment procedure well described	NA	YES Treatment protocol clearly described