ICONS REVIEW - FILTRATION SHEET (V5) RefMan AUTHOR/ ID YEAR TITLE (1st Reviewer initials few words) If unsure: Includes material related to one or more of the core continue to YES Exclude -NO **behavioural interventions** (BI) (tick which) screen and NOT BEH Not mark for PFMT PV author contact Other (specify) sure Refs checked? **Primary research** Systematic review Information? IS IT: Continue with screen Process for secondary (keep info if useful) Number new: (Tick one) references Exclude -NOT RES Relevant to the treatment of **urinary symptoms** including Exclude YES NO NOT UI urgency/frequency? Exclude YES Relevant to adults (18+)? NO NOT ADULT IS IT: (Tick one) **IMPLEMENTATION** or RCT/Quasi RCT of a behavioural Neither of these **EXPERIENCE** of behavioural intervention for UI? Exclude NOT intervention for UI? DESIGN Tests a **METHOD OF** Includes MORE THAN **DELIVERY** of a **ONE** cognitive, OR behavioural behavioural or psychointervention? social component A) formative/process YES UNSURE NO YES UNSURE NO evaluation Check for predictors and if B) Qualitative AND no - Exclude - NOT COMPLEX What are the additional research of components? client/staff views or Does **NOT** include a major experiences **PHYSICAL** component in the C) |Observational intervention study of moderators UNSURE YES NO of outcome Exclude **INCLUDE AS** INCLUDE CONFOUNDED IMPLEMENT? AS TRIAL? COMMENTS: Combined Single O/C Adherence OC ΜV UΥ

Add to 2ndary refs database and retreive