# Guide to assess scientific content

| Issue | No risk | Low risk | Moderate risk | High risk |
|---|---|---|---|---|
| * Content should contain the presenter's name and affiliated institution. Contact email address is preferred. | | | | |
| **Referencing** | Excellent referencing either with the slides (min. author, year) or with numbers and a reference slide at the end. | Good attempt at referencing with a number of minor gaps. No or minimal referencing is acceptable depending on the nature of the content. | Inaccurate **OR** virtually no referencing **AND** use of numbers/stats which obviously have an identifiable source. | No referencing. Implied that the work is the presenter's but it is more likely partially/fully developed by another source. |
| **Tables** | Good to high quality referencing on slide if tables are from an alternate source. (Full citation). | Poor to average quality referencing on slide if from an alternate source. Presenter acknowledges the external source. | Reproduced table/copied. No referencing/no acknowledgment of where the source is from. | Directly copied from a journal/on-line resource. No referencing. No attempt in presentation to acknowledge that this is not the presenter's work. |
| **Clinical diagrams** | Personally developed by the presenter **OR** external source referenced with used with permission. | Externally sourced diagrams that are fully referenced and/or from a source that is likely to enable free access. | Externally sourced diagrams that have no referencing **AND** are from a source that is likely to have restrictions of use. | Externally sourced diagrams that have no referencing are from a source that is unlikely to allow any use without fees. |
| **Entertainment graphics** | Personally developed by the presenter **OR** external source referenced with used with permission. No referencing is acceptable for graphics that can be used without restriction. No material that is likely to offend any mainstream/minority group. | Externally sourced graphics that are reasonably referenced and are from a source that is likely to enable free access. No material that is likely to offend any mainstream/minority group. | Externally sourced graphics that have no referencing but are from a source that is less likely to allow free access. **OR** Some material that will possibly offend any mainstream/minority group. | Externally sourced graphics that have no referencing but are from a source that is unlikely to allow free access. **OR** Some material that is offensive to any mainstream/minority group. |
| **Use of images** | Images are from a personal collection or the presenter's institution **AND** carry the initials of the person who did the examination. In the latter case, the person is acknowledged at the end of the presentation. Images from a journal article are used with permission. | Images are from a personal collection or the presenter's institution but don't carry the initials of the person who did the examination. No evidence to suspect these images are from an alternate source. Images from a journal article include a full citation. | Images are not owned by the presenter or the presenter's institution. External source is poorly acknowledged. | Image not owned by the presenter or the presenter's institution. External source is not acknowledged creating some impression that this image may be their work. |
| **Patient identification on images** | No patient ID (Name, UR No., date of birth). No site ID. No system company ID. | No patient ID. Some system or ultrasound company ID. | No patient ID. Obvious marketing of an ultrasound system or service provider. | Patient identification is on the image and no written permission from the patient. |
| **Overall quality** | Acceptable – excellent. | Acceptable. | Poor. | Very poor. |

**Other relevant comments:**

**Risk analysis**

**No risk:** Presents no risk to the ASA or to the individual presenter

**Low risk:** Presents no or little risk to the ASA or to the individual presenter

**Moderate risk:** Presents mild to moderate risk to the ASA or the presenter. Requires a second reviewer before the material becomes available and may require editing

**High risk:** Presents very high risk to the ASA and the presenter – should not be made available

**asa** australasian sonographers association