

## Internet Appendix A53: First Aid

### A53.1 Illustrative Pitch Template Example

This pitch is reverse engineered from the paper: Jeremy S Furyk, Carl J O’Kane, Peter J Aitken, Colin J Banks and David A Kault, (2009), “Fast versus slow bandaid removal: a randomised trial”, MJA, 191, 682-683.

Pitcher’s name	Marita Smith	FoR category	First Aid	Date completed	3/11/15
(A) Working Title	Fast versus slow bandaid removal				
(B) Basic Research Question	Is it less painful to remove bandaids quickly or slowly?				
(C) Key paper(s)	<p>Dykes, P. and Heggie, R. (2003). The link between the peel force of adhesive dressings and subject discomfort in volunteer subjects. <i>Journal of Wound Care</i> <b>12</b>, 260-262.</p> <p>Woo, KY., Harding, K., Price, P. and Sibbald, G. (2008). Minimising wound-related pain at dressing change: evidence-informed practice. <i>International Wound Journal</i> <b>5</b>, 144-157.</p>				
(D) Motivation/Puzzle	<p>Dressings are routinely applied to wounds around the world in household and medical institution settings. There is often significant pain and discomfort for the patient during dressing removal. Methods of alleviating and minimizing this pain have not been well explored in the literature. Previous studies have focused largely on the discomfort induced by a wide range of dressing products. Although the speed of dressing removal has been identified as a factor, it has not been explicitly studied, nor has an appropriate speed been identified. By focusing on a widely available wound dressing (the typical bandaid) it should be possible to identify a preferred speed of dressing removal.</p>				
THREE	Three core aspects of any empirical research project i.e. the “iDioTs” guide				
(E) Idea?	<p>The most ubiquitous methods of bandaid removal are slow and fast. There are proponents for both techniques in schoolyards and hospitals:</p> <ul style="list-style-type: none"> <li>- Slow technique - longer exposure time to unpleasant stimulus may minimize pain as it engages receptors gradually</li> <li>- Fast technique - short exposure time to unpleasant stimulus may minimize pain as it engages a short, intense stimulation of pain receptors</li> </ul>				

Template adapted from Faff, Robert W., Pitching Research (January 11, 2015). Available at SSRN: <http://ssrn.com/abstract=2462059> or <http://dx.doi.org/10.2139/ssrn.2462059>

	The perception of pain can be complex as it involves culture, prior pain experiences, beliefs, mood and ability to cope. By assessing the pain experienced under both slow and fast conditions in a randomized trial, it should be possible to statistically differentiate the two methods.
(F) Data?	A random sample of healthy volunteers (minimum sample size of 60 for statistical purposes) will be tested using slow and fast removal methods over multiple body locations. Subjects will rate the pain experienced using an 11-point verbal numeric scale. Additional data will also be gathered on age, sex, ethnicity, amount of body hair and preconceptions on which method is expected to be more painful.
(G) Tools?	Will require a decent sample size of willing volunteers (and possibly some impetus), access to a large number of sterile dressings, consistent bandaid removal technique by operators, and simple statistical analysis software.
TWO	Two key questions
(H) What's New?	Novel study that compares the leading methods of bandaid removal to answer the age-old question: fast or slow?
(I) So What?	This study will inform future wound care practices at all levels of patient care, from households to large medical institutions.
ONE	One bottom line
(J) Contribution	This study aims to identify a method of dressing removal that reduces patient pain and discomfiture.
(K) Other considerations	<p>Is Collaboration needed/desirable?</p> <ul style="list-style-type: none"> <li>-Idea: no;</li> <li>-Data; yes – will need multiple dressing removal operators plus at least one observer</li> <li>-Tools; no – simple software</li> </ul> <p>Target journals – <i>Medical Journal of Australia, International Wound Journal</i></p> <p>“Risk” assessment:</p> <ul style="list-style-type: none"> <li>-“no result” risk: low. It is highly likely that one method will be more painful; if both are similar, this is still a novel result.</li> <li>-“competitor risk”(i.e. being beaten by a competitor): low. The simplicity of this study means it is unlikely to be duplicated.</li> <li>-risk of “obsolescence”: Low. Dressing removal is inherent to the human condition.</li> </ul>

Template adapted from Faff, Robert W., Pitching Research (January 11, 2015). Available at SSRN: <http://ssrn.com/abstract=2462059> or <http://dx.doi.org/10.2139/ssrn.2462059>