Reviewer Comments

Note: One of the challenges of this case study was the page limit. A frequent criticism was that there was testing that should have been done or treatment approaches that should have been tried. In some instances, the reviewers were commenting on activities that I did not do and in other instances I had completed these activities but decided to leave them out of the paper in order to stay under the page limit.

Relevant History
- Reviewers rated the history as brief, but adequate

Assessment Methods/Tests & Results
- Reviewers commented that I should have conducted and reported cognitive testing rather than rely on the neuropsychologist’s report
- Some reviewers felt that assessment at the sentence level and above was inadequate
- Client self-rating and/or quality of life (QOL) measures were recommended.

Diagnostic and Prognostic Conclusions
- The reviewers had some questions about the diagnosis of phonological dyslexia and whether it was sufficient to explain all of the client’s symptoms. More information/evidence to identify and support a functional lesion (i.e. where in the chain of processing the breakdown was occurring) was needed.
- Reviewers did not believe there was adequate evidence reported to support the diagnosis of anomia

Management Recommendation and Procedures
- Overall, there were no significant criticisms about this section. One reviewer felt that I could have focused on other reading strategies to support the Multiple Oral Rereading treatment.

Data Documenting Outcome of Treatment
- One reviewer stated that it would have been useful to obtain reading satisfaction self-rating measures. No other issues were noted.

Rationale for Termination of Treatment and Recommendations for Follow-up
- Overall, reviewers felt that this section was weak because it did not discuss alternate means of helping the client in the future

Integration with Literature and Evidence-Based Practice Guidelines
- No significant issues other than a tendency to rely on old evidence
A Brief Self-Critique

- Reviewers commented that this section was poorly written compared to other sections and tended to be too vague. There was not enough reflection about how I could have managed the patient’s disappointment with his progress.