PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (http://bmjopen.bmj.com/site/about/resources/checklist.pdf) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Self-efficacy instruments for individuals with coronary artery
	disease: a systematic review protocol
AUTHORS	Almeida, Jose Alexandre; Florêncio, Rêncio; Lemos, Darllane;
	Leite, Jéssica; Monteiro, Karolinne; Peroni Gualdi, Lucien

VERSION 1 – REVIEW

REVIEWER	Lu, Minmin
	Fudan University
REVIEW RETURNED	16-May-2022

	1
GENERAL COMMENTS	The writing of the SR protocol is clear and very readable. There
	are some concerns.
	1. This SR will include published studies without language
	restricitions, but it is difficult to implement.
	2. If SE is a subscale of a questionnaire/ scale, for example, the
	Self-Care of Coronary Heart Disease Inventory has one part about
	SE, will this include or exclude in this SR? Please revise the
	inclusion and exclusion criteria.
	3. This SR will search databases such as MEDLINE, Web of
	Science, EMBASE and PsycINFO, is it possible that there are
	professional websites with SE tools?
	4. "Results and findings from different studies will be summarized
	if measurement properties are from the same instrument". How to
	summarize? Please describe it in detail.

REVIEWER	Jiang, Wenhui Xi'an Jiaotong University Health Science Center
REVIEW RETURNED	23-May-2022

GENERAL COMMENTS	I am delighted to review this manuscript. The construction of this paper is clear, but there are some aspects needed for clarification.
	Abstract: The abstract was described in a structured way. I suggest adding the results and conclusion in the method section. In addition, the search duration should be demonstrated in the method section.
	Methods: - What are inclusive and exclusive criteria for the studies? - Study population, type of studies, date of publication, the language of publications, and type of publications should be mentioned in this part. - How to analyze the data?
	Discussion:

What is new in this study?What is the limitation of this study?
References : The references should be updated.

VERSION 1 – AUTHOR RESPONSE

REVIEWER #1

Comment #1: The writing of the SR protocol is clear and very readable. There are some concerns. *Author's response: Thank you for your comment. We will address specific comments below.* **Comment #2:** This SR will include published studies without language restrictions, but it is difficult to implement.

Author's response: We appreciate your comment and understand your concern regarding the unrestricting language. However, most of the published manuscripts on this subject are published in the English language. Besides that, if any manuscript is written in another language that is not English the authors will have the support of translators.

Comment #3: If SE is a subscale of a questionnaire/ scale, for example, the Self-Care of Coronary Heart Disease Inventory has one part about SE, will this include or exclude in this SR? Please revise the inclusion and exclusion criteria.

Author's response: We understand your questions and doubts. The study will not include studies of instruments that have self-efficacy in their construct (eg, self-management, self-care), limiting to self-efficacy instruments for coronary patients. Such information was added in the methods session on page 4, lines 103 to 105.

Comment #4: This SR will search databases such as MEDLINE, Web of Science, EMBASE and PsycINFO, is it possible that there are professional websites with SE tools?

Author's response: We appreciate your questioning. However, the authors believe that the best databases to find SE scales and/or questionnaires are the ones already chosen to the study. We also believe that all documents published in professional websites are already available in these databases.

Comment #5: Results and findings from different studies will be summarized if measurement properties are from the same instrument". How to summarize? Please describe it in detail. *Author's response: We appreciate your questioning. In the possibility of validation studies of the same instrument for different populations, methodological and psychometric properties quality of such studies will be addressed as a unique instrument but discussing the particularity of each version. Such information was added in the methods session on page 6, lines 154 to 157.*

Reviewer #2

Comment #1: I am delighted to review this manuscript. The construction of this paper is clear, but there are some aspects needed for clarification.

Author's response: Thank you for your comment. We will address specific comments below. **Comment #2:**

Abstract: The abstract was described in a structured way. I suggest adding the results and conclusion in the method section. In addition, the search duration should be demonstrated in the method section. *Author's response: We appreciate your suggestion. However, we have followed the abstract model for protocols of the journal which includes introduction, methods and analysis, ethics and dissemination and PROSPERO registration number. Besides that, as the protocol has not started, we have no results and/or conclusion to add at this moment. Moreover, the expected start date is July 1st, 2022 and study completion June 30th, 2023, including submission and publication. Comment #3: Methods*

- What are inclusive and exclusive criteria for the studies?

Author's response: Thank you for your questions. We will include all studies of assessment of measurement properties of cardiac self-efficacy instruments for individuals with CAD without language and date restriction. We will exclude clinical trials or validation studies using self-reported or proxy-reported measurements and those published as abstracts. Moreover, studies of instruments that have self-efficacy in their construct (eg, self-management, self-care) will also be excluded, limiting to self-efficacy instruments for coronary patients (such information can be seen on page 04, lines 100 to 105).

- Study population, type of studies, date of publication, the language of publications, and type of publications should be mentioned in this part.

Author's response: We appreciate your suggestion. We believe that along the methods and analysis section we have described all the information regarding such questioning. We will include all studies of assessment of measurement properties of cardiac self-efficacy instruments for individuals with Coronary Arterial Disease except clinical trials or validation studies using self-reported or proxy-reported measurements and those published as abstracts (page 4, lines 100 to 103). Moreover, studies of instruments that have self-efficacy in their construct (eg, self-management, self-care) will also be excluded, limiting to self-efficacy instruments for coronary patients (page 04, lines 103 to 105). The type of instrument will be questionnaire or scale of cardiac self-efficacy for individuals with CAD (page 04, lines110 to 111) with no language and date restrictions (page 04, lines 101 to 102)

- How to analyze the data?

Author's response: We appreciate your question. We believe that along the methods session we have described all information regarding data analysis. The review will provide a narrative summary of the results and the studies will be grouped according to the similarity established by the authors as described on page 4, lines 157 to 160. These results will be summarized in groups and assessed according to their properties measures (page 4, lines 158 to 160) and methodological quality by GRADE (page 4, lines 160 to 162). Afterward, instruments will be categorized and justified according to COSMIN recommendations (page 4, lines 166 to 169).

Comment #4: Discussion

- What is new in this study?

Author's response: We appreciate your question. We believe that the novelty of the study regards the systematic review compiling several instruments assessing cardiac self-efficacy as well as the psychometric analysis which will help health professionals in the choice of the best instrument for their patients. Moreover, this protocol may be limited due to the lack of patients and public involvement. - What is the limitation of this study?

Author's response: Thank you for your questioning. We believe that the limitations of the study will be related to following COSMIN and PRISMA as studies only report some psychometric properties. **Comment # 5:** The references should be updated.

Author's response: We appreciate your comment. However, we may justify the inclusion of such references as they bring definitions or information of the original questionnaire and/or scale. We have reviewed all of them and most updated references were included.

REVIEWER Lu, Minmin Fudan University REVIEW RETURNED 27-Jun-2022 GENERAL COMMENTS The protocol is clear, but there are some concerns. Methods Methods

VERSION 2 – REVIEW

-"Clinical trials or validation studies using self-reported or proxy- reported measurements and those published as abstracts". This sentence is incomplete. And inclusion and exclusion criteria are not clear, such as the language of publications, date of publications. Discussion -There is no discussion in the SR protocol.	s
--	---

VERSION 2 – AUTHOR RESPONSE

REVIEWER #1

Comment #1: Methods

-"Clinical trials or validation studies using self-reported or proxy-reported measurements and those published as abstracts". This sentence is incomplete. And inclusion and exclusion criteria are not clear, such as the language of publications, date of publications.

Author's response: We appreciate your comment. The authors added the information "Clinical trials or validation studies using self-reported or proxy-reported measurements and those published as abstracts will be excluded". Changes were made on page 04, and lines 103 to 104. As for inclusion and exclusion criteria, it will be done as reported in the "Inclusion and exclusion criteria" topic, located on page 04, lines 99 to 106. Moreover, there is no language and date of publication restriction as shown is the inclusion and exclusion topic.

Comment #2: Discussion

-There is no discussion in the SR protocol. [NOTE FROM THE EDITORS: As per the previous decision, a Discussion section is not required, so this comment can be rebutted].

Author's response: We appreciate your comment. According to the editor's suggestions, a discussion section is not necessary for systematic review protocols, as there is no data to be discussed at the moment.