# BMJ Open Quality and reliability evaluation of online videos on carpal tunnel syndrome: a YouTube videobased study

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To cite: Kwak D, Park JW, Won Y. et al. Quality and reliability evaluation of online videos on carpal tunnel syndrome: a YouTube videobased study. BMJ Open 2022;12:e059239. doi:10.1136/ bmjopen-2021-059239

Prepublication history and additional supplemental material for this paper are available online. To view these files. please visit the journal online (http://dx.doi.org/10.1136/ bmjopen-2021-059239).

Received 14 November 2021 Accepted 31 March 2022



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## **ABSTRACT**

**Objectives** With the increasing popularity of searches for medical information on YouTube, the availability of videos concerning carpal tunnel syndrome (CTS) is increasing. This study aimed to evaluate the quality and reliability of YouTube videos on CTS.

Setting and participants No participants were included. Primary and secondary outcome measures We searched YouTube on 1 April 2021 using the keywords "carpal tunnel syndrome" and "carpal tunnel release" and evaluated the first 55 retrieved videos. We summarised the video characteristics including Video Power Index (VPI), which was designed to evaluate video popularity based on the number of likes and views. We categorised them based on source and content. Video quality and reliability were evaluated using the Journal of the American Medical Association (JAMA) benchmark criteria, the Global Quality Score (GQS) and the Carpal Tunnel Syndrome-Specific Score (CTS-ss).

Results The mean (range: minimum-maximum) of JAMA scores, GQS and CTS-ss were 2.13 (1-4), 2.69 (1-5). and 5.0 (1-15), respectively. The most common source of video was from allied health workers, and academically sourced videos had the highest JAMA score and GQS. Three scores were significantly correlated with each other. Multiple linear regression analysis showed that a higher JAMA score was associated with a higher likes ratio, and a higher GQS was associated with a longer video running time and greater number of comments. However, a higher VPI was not associated with higher video quality or reliability represented by the three scores.

Conclusions YouTube videos on CTS have low quality and reliability. Video popularity was not significantly correlated with quality or reliability. Our findings suggest that expert groups should provide and promote high-quality video content to YouTube users and patients.

## **BACKGROUND**

With the internet penetration rate exceeding 50% worldwide, searches for health information on the internet have become common. According to recent studies, 80% of internet users searched for health information online,<sup>2</sup> and up to 30% of orthopaedic patients searched online for disease

# Strengths and limitations of this study

- Various characteristics including number of views, number of likes, Video Power Index and video uploader in the YouTube videos about carpal tunnel syndrome were investigated.
- The reliability and quality of videos were investigated using three scoring systems: Journal of the American Medical Association benchmark criteria, Global Quality Score and Carpal Tunnel Syndrome-Specific Score.
- > Although these scoring systems are subjective and unvalidated, the scoring systems were independently assessed twice by the two raters, which showed intraobserver and interobserver agreements determined by intraclass correlation coefficients.
- A multiple linear regression analysis was performed to identify video characteristics affecting the reliability and quality of videos.

information.<sup>3</sup> Furthermore, well-designed videos of disease information positively affect treatment outcomes by improving patient comprehension.<sup>4 5</sup> However, most online information is not regulated, resulting in the spread of inaccurate and low-quality data among patients. 6-10 Therefore, physicians should properly evaluate such information and help patients obtain accurate information and appropriate treatment.

YouTube, which has over 1 billion users watching over 1 billion hours of videos each day, is a source of representative video-based educational content. 11 Although some highquality orthopaedic content is uploaded by qualified experts on YouTube, most of the related content is uploaded by unqualified individuals, providing patients inaccurate and erroneous information. In previous quality-evaluating studies in the orthopaedic field, YouTube video accuracy and quality were low. 1 10 12-14



According to previous studies that investigated the quality of carpal tunnel syndrome (CTS) information provided by internet search engines, <sup>15–17</sup> the quality of online information has improved over the past decade but remains low. These studies reported that there was significant scope for improvement. In contrast, recent studies <sup>18</sup> reported that most YouTube videos and websites that provide information on CTS can reinforce misconceptions. Two quality-evaluating studies on CTS information available on YouTube <sup>20</sup> <sup>21</sup> focused on video quality and reliability, and neither examined the relationship between characteristics such as video popularity and quality.

The current study aimed to (1) evaluate the quality and reliability of YouTube videos concerning CTS; (2) investigate the video characteristics, sources and contents; and (3) determine the relationship between video characteristics and quality.

#### **METHODS**

#### Patient and public involvement

No patients were involved.

### YouTube search design and study setting

The YouTube online library (https://www.youtube.com) was searched on 1 April 2021 using the terms "carpal tunnel syndrome" and "carpal tunnel release". The first 50 videos retrieved based on each keyword and sorted by 'view count' for a total of 100 videos were selected for review. Of them, 45 were excluded (duplicates, 39; non-English, 3; information on cubital tunnel syndrome, 2; and soundtrack with no mention of carpal tunnel, 1). Thus, 55 YouTube videos found using the keywords "carpal tunnel syndrome" and "carpal tunnel release"

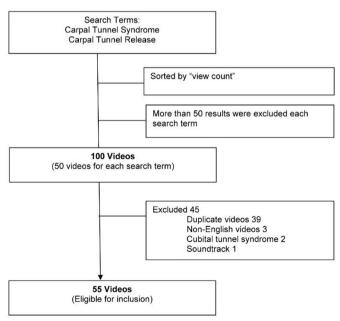


Figure 1 Search methodology for carpal tunnel syndromerelated YouTube videos.

were analysed (figure 1). The URLs of each video are listed in online supplemental table 1.

Data on the following video characteristics were collected from each YouTube video: (1) title, (2) channel name, (3) number of subscribers, (4) video running time, (5) number of views, (6) number of comments, (7) video source/uploader, (8) content type, (9) days since upload, (10) view ratio (number of views:days since upload), (11) number of likes, (12) number of dislikes, (13) likes ratio (likes×100/[likes+dislikes]) and (14) Video Power Index (VPI). The VPI was calculated using the following formula: like ratio×view ratio/100. This value is an index designed to evaluate video popularity based on the number of likes and views. 1

Video sources/uploaders were categorised as follows<sup>110</sup>: (1) academic (uploaders affiliated with universities or research groups); (2) physicians (individual physicians or physician groups not affiliated to a university or research institute); (3) non-physicians (allied health workers such as alternative medical providers, physiotherapists and occupational therapists); (4) trainers; (5) medical sources (animations or related content from health websites); (6) patients; and (7) commercial. Contents were categorised as follows: (1) exercise training; (2) disease information; (3) patient experience; (4) surgical technique; (5) nonsurgical management, such as chiropractic treatment; and (6) advertisement.

#### **Evaluation of video quality and reliability**

The quality and reliability of YouTube videos were assessed using three scoring systems: the Journal of the American Medical Association (JAMA) benchmark criteria, the Global Quality Score (GQS) and the Carpal Tunnel Syndrome-Specific Score (CTS-ss). The JAMA criteria enable a non-specific assessment of content reliability and include four criteria (table 1).<sup>22</sup> Each criterion is assigned 1 point for a maximum total of 4 points. A score of 0 indicates low video reliability and accuracy, whereas a score of 4 indicates high video reliability and accuracv. The GQS<sup>1 10 23</sup> consists of five grades and provides a non-specific assessment of health-related website quality (table 2). The total GQS ranges from 1 to 5, with a higher score indicating better educational quality. To better evaluate quality and accuracy of YouTube videos concerning CTS, we employed the new CTS-ss, which consists of 20 items. We generated this scoring system based on recent review articles<sup>24-26</sup> and guidelines published by the American Academy of Orthopaedic Surgeons,<sup>27</sup> which were considered reasonable in previous studies. 9 10 The CTS-ss evaluates information on (1) patient symptoms and population, (2) carpal tunnel anatomy, (3) CTS diagnosis and evaluation, (4) treatment options, and (5) postoperative care and course (box 1). One point was given for each of the 20 items for a total maximum of 20 points. Higher scores indicated higher CTS-specific educational value.



 
 Table 1
 Journal of the American Medical Association
 benchmark criteria<sup>22</sup>

Criterion	Description
Authorship	Author and contributor credentials and their affiliations should be provided.
Attribution	All copyright information should be clearly listed, and references and sources for content should be stated.
Currency	The initial date of posted content and dates of subsequent updates to content should be provided.
Disclosure	Conflicts of interest, funding, sponsorship, advertising, support and video ownership should be fully disclosed.

# Intraobserver reliability and interobserver agreement assessment

All three scoring systems (JAMA, GQS and CTS-ss) were independently assessed twice, 30 days apart, by two raters, consisting of one orthopaedic surgeon (DK) and one family medicine doctor (YK). Intraobserver and interobserver agreements were determined using intraclass correlation coefficients (ICCs). ICCs for absolute agreement with a single measurement were used to identify intraobserver reliability with a two-way mixed-effects analysis of variance models. ICCs for absolute agreement with a single rater were used to identify interobserver agreement using two-way random-effects analysis of variance models. A guideline<sup>28</sup> for evaluating ICC values was adopted: excellent (>0.90), good (0.75–0.90), moderate (0.50-0.75) and poor (<0.50). In cases of disagreement, all authors re-evaluated the video in question until consensus was reached.

# Statistical analysis

Continuous variables are presented as mean±SD. Differences in the JAMA score, GQS, CTS-ss and VPI according

Table 2	Global Quality Score criteria 1 10 23
Grade	Description of quality
1	Poor quality, information missing, technique misleading; unlikely to be useful for patient education
2	Generally sparse quality, some information provided but majority lacking, technique poor; limited use for patients
3	Moderate quality, important information provided but some lacking, technique mostly adequate; somewhat useful for patients
4	Good quality, majority of information provided but some information lacking, technique adequate; useful for patients because most important topics are covered
5	Excellent quality, full information provided, technique adequate; highly useful for patients

#### CTS-ss for video content Box 1

#### Patient presentation

- Describes symptoms (eg. nocturnal paraesthesia, loss of sensation, thenar muscle atrophy).
- Describes patient population, especially high prevalence in older

# Information about carpal tunnel syndrome

- Describes carpal tunnel anatomy and/or function.
- Mentions caused by nerve compression.
- Describes risk factors (eg, diabetes, hypothyroidism, pregnancy and repetitive use).

# **Diagnosis and evaluation**

- Mentions physical examination and findings (eg, Tinel's sign and Phalen's manoeuvre).
- Discusses electrophysiological tests.
- Discusses additional diagnostic tests (eg, ultrasound and MRI).
- Mentions patient-centred measures (eg, the Boston Carpal Tunnel Syndrome Questionnaire).
- Discusses differential diagnosis (eg, cervical radiculopathy).

#### **Treatment**

- Describes non-surgical treatment, especially changes in habits.
- Mentions that laser therapy is one of the non-surgical options.
- Mentions pharmacotherapy (eg, local corticosteroid injection, NSAIDs).
- Mentions musculoskeletal manipulation and/or splinting.
- Describes surgical treatment that is the most effective treatment.
- Mentions open carpal tunnel release.
- Mentions endoscopic carpal tunnel release.

#### Postoperative care

- Describes complications and outcomes (eg. CRPS, scar tenderness, reoperation).
- Mentions need for postoperative physical therapy.
- Outlines return-to-function timeline.

CRPS, complex regional pain syndrome; CTS-ss, Carpal Tunnel Syndrome-Specific Score; NSAIDs, non-steroidal anti-inflammatory drugs.

to (1) video upload source and (2) category of video contents were evaluated by one-way analysis of variance tests (for normally distributed data) and Kruskal-Wallis tests (for non-normally distributed data) followed by post hoc tests using the Bonferroni method. A Spearman correlation analysis was used to assess the correlation between scores and between video characteristics and scores. A multiple linear regression analysis was performed to identify video characteristics affecting the JAMA score, GQS, CTS-ss and VPI. All reported p values were two-sided, and those < 0.05 were considered statistically significant.

### **RESULTS**

## Video characteristics and quality scores

The mean JAMA score, GQS and CTS-ss were 2.13, 2.69 and 5.0, respectively, indicating low reliability and educational quality (table 3). Raw scores of JAMA score and CTS-ss are shown in online supplemental table 2.

**Table 3** Characteristics of 55 YouTube videos about carpal tunnel syndrome

Variable	Value
Number of subscribers	742 791.7±1 183 968
Video running time (s)	400.71±271.91
Number of views	1 559 722±7 629 661
Number of days since upload	2450.27±1250.96
Number of comments	316.75±332.4
Number of likes	5184.51±4804.72
Number of dislikes	242.8±421.93
View ratio	478.77±1506.85
Like ratio	92.81±7.39
VPI	382.9±910.34
JAMA scores	2.13±0.94
GQS	2.69±1.17
CTS-ss	5.0±3.29

Data are presented as mean±SD.

Formulas: view ratio, number of views/days since upload; like ratio, number of likes×100/[number of likes+number of dislikes]; VPI, like ratio×view ratio/100.

CTS-ss, Carpal Tunnel Syndrome-Specific Score; GQS, Global Quality Score; JAMA, *Journal of the American Medical Association*; VPI, Video Power Index.

Non-physician video sources accounted for the largest share (29.09%), while commercial sources accounted for the lowest share (5.45%) (figure 2). Disease-specific information accounted for the largest share (32.73%), while patient experience accounted for the smallest share (3.64%) (figure 3). The video title, YouTube channel name, JAMA score, GQS, CTS-ss and VPI of the top 55 videos are listed in order of the number of views in figure 4.

# Differences in video reliability and quality by source and content

The JAMA score (p<0.0001) and GQS (p=0.0004) differed significantly among the seven groups of video sources,

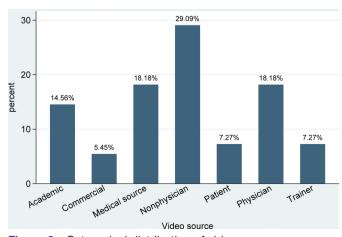


Figure 2 Categorical distribution of video source.

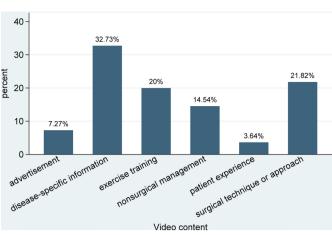


Figure 3 Categorical distribution of video content.

with videos from academic and physician sources having the highest mean JAMA scores and GQS (table 4). The JAMA score (p=0.0077) and GQS (p=0.0018) differed significantly among the six groups of video content, with videos about surgical technique and disease-specific information having the highest mean JAMA scores and GQS. However, the CTS-ss and VPI did not differ significantly between the groups based on video sources and contents.

# Factors affecting video quality and popularity

JAMA, GQS and CTS-ss significantly correlated with each other (JAMA score vs GQS, p<0.001; JAMA score vs CTSss, p=0.001; GQS vs CTS-ss, p<0.001). However, the VPI was not significantly correlated with the three scores. Multiple linear regression analysis showed that a higher JAMA score was associated with a higher likes ratio of an academic or physician upload source compared with a patient upload source (table 5). A higher GQS was associated with a longer video running time; greater number of comments; and higher probability of academic, physician, non-physician, medical information and commercial upload source than of patient upload source. A higher CTS-ss was more associated with academic, physician, medical information, and commercial upload sources than patient upload sources. However, a higher VPI was not associated with higher video quality or reliability scores.

# Intraobserver reliability and interobserver agreement assessment

The intraobserver reliability of the two raters was excellent for the JAMA score, GQS and CTS-ss. The interobserver agreement between raters was good for the JAMA score (ICC 0.881, 95% CI 0.804 to 0.929), good for the GQS (ICC 0.881, 95% CI 0.804 to 0.929) and excellent for the CTS-ss (ICC 0.941, 95% CI 0.898 to 0.966).

# **DISCUSSION**

This study demonstrated that the reliability and quality of YouTube videos concerning CTS were low. This result was consistent with that of other previously conducted

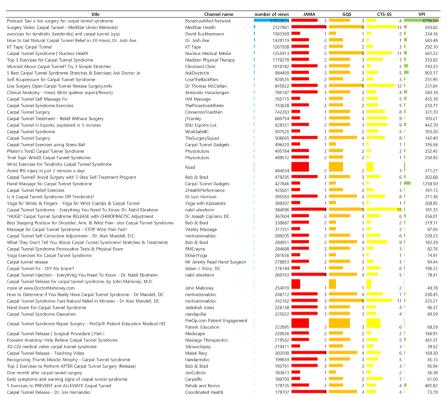


Figure 4 Data-bar visualisation of the top 55 carpal tunnel syndrome and release videos with the highest number of views. CTS-ss, Carpal Tunnel Syndrome-Specific Score; GQS, Global Quality Score; JAMA, Journal of the American Medical Association: VPI. Video Power Index.

YouTube video quality evaluation studies. 1 10 13 20 21 29-31 Mert and Bozgevik<sup>20</sup> evaluated the quality of CTS videos on YouTube and reported that the video reliability and quality were low. They presented no significant relationship between video characteristics, reliability and quality evaluation scoring systems. Radonjic et al<sup>21</sup> also evaluated CTS videos on YouTube and showed low reliability and quality and found that videos uploaded by physicians had significantly higher reliability and quality evaluation scores than those uploaded by non-physicians. Goyal et al<sup>18</sup> reported that YouTube videos of CTS have low information quality. They determined that the potential reinforcement of misconceptions is prevalent in YouTube videos on CTS.

Although the overall reliability and educational quality of YouTube videos were low, those of videos from academic and physician uploaders or about surgical techniques and disease-specific information were significantly higher than those of other video sources and contents. This is because the main purpose of these video sources and contents is to educate doctors, medical students and patients. In contrast, the CTS-ss did not differ significantly among the video sources and contents because YouTube videos focus on specific topics, such as symptoms and surgical technique or rehabilitation after surgical treatment, and deliver the content within a short running time. Additionally, some specific channels, such as the 'Bob & Brad' channel, posted videos in four series about CTS and release. Casual YouTube viewers cannot obtain

sufficient content on CTS and release in only one or two posted videos, but an entire series can provide most of the content. YouTube uploaders usually post short videos of less than 10 min to maximise the number of views and user interest; thus, they split the content into several

Most of the videos had low reliability and educational quality, but some videos had useful practicality and educational information. The 'Carpal Tunnel Syndrome - Everything You Need To Know - Dr. Nabil Ebraheim' video of the nabil ebraheim channel explains the overall symptoms, anatomy and risk factors of CTS. In the 'Surgery Video: Carpal Tunnel - MedStar Union Memorial' video of the MedStar Health channel, the surgical procedure and method of endoscopic carpal tunnel release were shown in detail. The 'How to Determine If You Really Have Carpal Tunnel Syndrome - Dr Mandell, DC' video of the motivationaldoc channel shows the physical examination required for CTS diagnosis.

In this study, video popularity showed no significant correlation with reliability or quality. Popular videos that casual YouTube users and patients frequently watch do not have good quality and reliability. Interestingly, YouTube videos of expert groups that are expected to have high reliability and quality, such as the American Academy of Orthopaedic Surgeons or Federation of European Societies for Surgery of the Hand, were not included in the top 55 videos. A manual search identified only about 1600 views for the carpal tunnel release video

Grouping variable	JAMA score	GQS	CTS-ss	VPI
deo source				
Academic	3.38±0.74	3.63±1.06	6.12±5.0	1077.92±2324.16
Physician	2.7±0.82	3.5±1.18	6.4±3.24	156.50±79.12
Non-physician	2.0±0.52	2.43±0.73	4.13±2.28	314.65±204.90
Trainer	1.25±0.5	1.5±0.58	3.0±2.31	243.20±157.61
Medical	1.7±0.82	2.7±1.25	5.6±3.41	371.63±370.09
Patient	1.25±0.5	1.25±0.5	2.25±0.5	172.21±127.05
Commercial	1.33±0.58	2.33±0.58	6.33±3.06	152.93±122.48
P value*	<0.0001	0.0004	0.1306	0.4234
Significant difference in post hoc analysis†	Academic versus non-physician, trainer, medical, patient, commercial; Physician versus trainer, medical, patient, commercial	Academic versus trainer, patient; Physician versus trainer, patient		
/ideo content				
Exercise training	1.73±0.79	1.91±0.83	3.09±1.97	344.15±266.65
Disease-specific	2.33±0.84	3.17±1.04	6.22±3.54	227.41±161.24
Patient experience	1.5±0.71	1.5±0.71	2.5±0.71	133.82±109.52
Surgical technique	2.83±1.11	3.42±1.16	5.92±3.65	724.92±1917.21
Non-surgical	1.63±0.52	2.13±1.13	4.13±2.64	396.44±367.10
Advertisement	1.5±0.58	2.25±0.5	5.0±3.65	260.57±237.37
P value‡	0.0077	0.0018	0.0897	0.3493
Significant difference in post hoc analysis†	Surgical technique versus exercise training, non-surgical	Disease-specific, surgical technique versus exercise training		

Data are presented as mean±SD.

uploaded to the American Academy of Orthopaedic Surgeons YouTube channel (https://www.youtube.com/watch?v=eemuH5UYElo). Additionally, the Federation of European Societies for Surgery of the Hand and the British Society for Surgery of the Hand channels have no CTS-related videos and only 154 and 575 subscribers, respectively. It is necessary to promote an expert group's YouTube videos and channels and try to provide accurate medical information by uploading a high-quality video and exposing it to casual YouTube users and patients.

In a previous study on the meniscus, <sup>10</sup> video dislikes were described as predictors of YouTube video reliability, but this was not the case in this study. The independent predictor of the JAMA score in this study was the likes ratio. Furthermore, independent predictors of GQS were video running time and number of comments, suggesting that videos with a longer running time and greater number of comments are independently and significantly associated

with a higher GQS. The longer the video running time, the greater the amount of information it contains; therefore, its educational quality also increases. For GQS, a greater number of comments contain more useful information for users who watched the video. Regarding the CTS-ss, compared with patient upload sources, academic, physician, medical and commercial upload sources are associated with a higher CTS-ss. However, unlike the JAMA score and GQS, CTS-ss showed no significant association with video characteristics except for video source.

Our study has several limitations. First, we searched the top 50 videos for "carpal tunnel syndrome" and "carpal tunnel release" on YouTube in the order of popularity. This search strategy missed certain videos with low views or hits but with potentially high quality. Although our search strategy could miss high-quality videos that are less 'popular', this strategy is the actual method by which casual YouTube users obtain information. Second,

<sup>\*</sup>For the video source group, significant differences were seen in JAMA score and GQS.

<sup>†</sup>Post hoc tests were performed using Bonferroni's method.

<sup>‡</sup>For the video content group, significant differences were seen in JAMA score and GQS.

CTS-ss, Carpal Tunnel Syndrome-Specific Score; GQS, Global Quality Score; JAMA, Journal of the American Medical Association; VPI, Video Power Index.



Table 5 Multiple linear regression analysis of correlations between video characteristics and the VPI, JAMA score, GQS and CTS-ss

010-33				
Variable	Unstandardised beta (B)	95% CI	Standardised β	P value
VPI (R <sup>2</sup> =0.997)				
Days since upload	-0.039	-0.058 to -0.02	-0.053	< 0.001
View ratio	0.595	0.576 to 0.614	0.985	<0.001
Number of likes	14.118	6.808 to 21.428	0.075	< 0.001
JAMA score (R <sup>2</sup> =0.626)				
Like ratio	0.054	0.001 to 0.107	0.424	0.045
Video source				
Academic	2.126	1.164 to 3.088	0.801	< 0.001
Physician	1.187	0.239 to 2.136	0.49	0.015
GQS ( $R^2$ =0.561)				
Video running time	0.001	0 to 0.002	0.252	0.044
Number of comments	0.002	0 to 0.003	0.461	0.029
Video source				
Academic	3.025	1.735 to 4.315	0.921	<0.001
Physician	2.465	1.193 to 3.736	0.821	<0.001
Non-physician	1.596	0.337 to 2.856	0.626	0.014
Medical	1.878	0.661 to 3.094	0.625	0.003
Commercial	1.874	0.32 to 3.429	0.368	0.019
CTS-ss (R <sup>2</sup> =0.356)				
Video source				
Academic	6.225	1.825 to 10.624	0.673	0.007
Physician	5.174	0.838 to 9.51	0.612	0.021
Medical	4.978	0.828 to 9.128	0.589	0.02
Commercial	6.430	1.13 to 11.731	0.448	0.019

CTS-ss, Carpal Tunnel Syndrome-Specific Score; GQS, Global Quality Score; JAMA, *Journal of the American Medical Association*; VPI, Video Power Index.

YouTube video metrics such as the number of likes and views are constantly updated; therefore, these study data are accurate only on the date of the search. Third, the assessment scoring systems that we used (the JAMA score, GQS and CTS-ss) are subjective and unvalidated. Because the JAMA benchmark criteria were developed to assess medical information on the internet website rather than video information, the criteria may not fit YouTube videos. The CTS-ss includes many contents of CTS, but almost YouTube videos have a short duration of about 10 min or less. Thus, it tends to be difficult to present all checklist of CTS-ss in short videos. Because some criteria in the JAMA benchmark criteria and CTS-ss were unsatisfied in most of videos, total score may be mainly influenced by some criteria; thus, all criteria have no equal weight. Nevertheless, we have no choice but to use these scoring systems due to lack of validated scoring system for evaluating the quality and reliability of medical information in YouTube videos. The excellent interobserver and intraobserver reliability were confirmed using ICCs to redeem these shortcomings. In addition, the GQS may be

highly subjective; thus, we tried to resolve the subjectivity by having two independent authors perform each evaluation twice. Fourth, one video entitled 'Podcast: See a Live Surgery for Carpal Tunnel Syndrome' has the dominant number of views (66.5%), so the average views and VPI values tended to increase. We tried to buffer this dominance by analysing 55 videos.

# **CONCLUSIONS**

This study demonstrated that YouTube videos of CTS showed low reliability and quality. Video quality is significantly associated with content and upload source. Video popularity was not correlated with video reliability or quality, which suggests that a good content quality does not guarantee video popularity. The impact of videos on patient care cannot be underestimated. To ensure the spread of accurate information, it is necessary to have YouTube videos published by expert groups and to strive to provide high-quality video materials that can assist with patient diagnosis and treatment.



Contributors DK: design of the study, acquisition of data, interpretation of data, statistical analysis and writing of initial draft; JWP: interpretation of data and critical revision of the manuscript; YW: acquisition and analysis of the data; YK: interpretation of data and statistical analysis; JIL: supervised the study and critically revised the manuscript; all authors: read and approved the final manuscript. JIL is quarantor of this study.

**Funding** This works was supported by the National Research Foundation of Korea (NRF) grant funded by the Korea government (MSIT) (NRF-2020R1C1C1004851).

Competing interests None declared.

Patient and public involvement Patients and/or the public were not involved in the design, or conduct, or reporting, or dissemination plans of this research.

Patient consent for publication Not applicable.

**Ethics approval** No human participants included, but ethical approval for this study was obtained from the institutional review board of Korea University Guro Hospital (registration number 2021GR0314).

Provenance and peer review Not commissioned; externally peer reviewed.

Data availability statement All data relevant to the study are included in the article or uploaded as supplemental information.

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Supplementary Material for: "Quality and Reliability Evaluation of Online Videos on Carpal Tunnel Syndrome: A YouTube Video-based Study"

Journal: BMJ Open

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**Supplementary Table 1.** Full list of video URLs included in the study

		Full list	of video URLs
Number	Channel Name	Video Title	URLs
1	BroadcastMed Network	Podcast: See a live surgery for carpal tunnel syndrome	https://www.youtube.com/watch?v=XCcplgeQzrU
2	David Kuckhermann	exercises for tendinitis (tendonitis) and carpal tunnel (cps)	https://www.youtube.com/watch?v=hUyMNyrOHJQ
3	Dr. Josh Axe	How to Get Natural Carpal Tunnel Relief in 24 Hours Dr. Josh Axe	https://www.youtube.com/watch?v=LTKyioqoZVM
4	KT Tape	KT Tape: Carpal Tunnel	https://www.youtube.com/watch?v=FAWu0_SWDhM
5	Nucleus Medical Media	Carpal Tunnel Syndrome   Nucleus Health	https://www.youtube.com/watch?v=z-SeJh5-nOo
6	Madden Physical Therapy	Top 3 Exercises for Carpal Tunnel Syndrome	https://www.youtube.com/watch?v=gTxQqu9USC4
7	Cleveland Clinic	Worried About Carpal Tunnel? Try 3 Simple Stretches	https://www.youtube.com/watch?v=f2lHpWNaQaQ
8	AskDoctorJo	5 Best Carpal Tunnel Syndrome Stretches & Exercises - Ask Doctor Jo	https://www.youtube.com/watch?v=Q5G916yCyF0
9	LoseTheBackPain	Self Acupressure for Carpal Tunnel Syndrome	https://www.youtube.com/watch?v=0GtGmf6Z760
10	Dr Thomas McClellan	Live Surgery Open Carpal Tunnel Release Surgery.m4v	https://www.youtube.com/watch?v=YVPe5WTl5yg

Supplemental material

		Know - Dr. Nabil	
		Ebraheim	
28	Dr Joseph Cipriano	*HUGE* Carpal Tunnel	https://www.youtube.com/watch?v=YMUBlaVChOs
	DC	Syndrome RELEASE with	
		CHIROPRACTIC	
		Adjustment	
29	Bob & Brad	Best Sleeping Position for	https://www.youtube.com/watch?v=YZLMpSGOz34
		Shoulder, Arm, & Wrist	
		Pain- also Carpal Tunnel	
		Syndrome	
30	Vitality Massage	Massage for Carpal Tunnel	https://www.youtube.com/watch?v=30Aq24-xp2c
		Syndrome - STOP Wrist	
		Pain Fast!	
31	motivationaldoc	Carpal Tunnel Self-	https://www.youtube.com/watch?v=iHVtzOCGy0Y
		Correction Adjustment -	
		Dr. Alan Mandell, D.C.	
32	Bob & Brad	What They Don't Tell You	https://www.youtube.com/watch?v=n26CXK6xZek
		About Carpal Tunnel	
		Syndrome! Stretches &	
		Treatments	
33	RMCrayne	Carpal Tunnel Syndrome	https://www.youtube.com/watch?v=Ze9piW3wgYw
		Provocative Tests &	
		Physical Exam	
34	EkhartYoga	Yoga Exercises for Carpal	https://www.youtube.com/watch?v=x3Yb0KVXcTE
		Tunnel Syndrome	
35	Mr Jeremy Read	Carpal tunnel release	https://www.youtube.com/watch?v=yHx_CBf2tqo
	Hand Surgeon		
36	nabil ebraheim	Carpal Tunnel Injection -	https://www.youtube.com/watch?v=G4OanhAEZoM
		Everything You Need To	
		Know - Dr. Nabil	
		Ebraheim	
37	motivationaldoc	How to Determine if You	https://www.youtube.com/watch?v=SSbcdh4SVpE
		Really Have Carpal	
		Tunnel Syndrome - Dr	
		Mandell, DC	
38	motivationaldoc	Carpal Tunnel Syndrome:	https://www.youtube.com/watch?v=ZBvZlsY-Kdc
		Fast Natural Relief in	
		Minutes - Dr Alan	
		Mandell, DC	

39	Jedediah Jones	Hand Exam For Carpal Tunnel Syndrome	https://www.youtube.com/watch?v=FRO78pJ8VXo
40	PreOp.com Patient Engagement - Patient Education	Carpal Tunnel Syndrome Repair Surgery - PreOp® Patient Education Medical HD	https://www.youtube.com/watch?v=-vSgnYhoITc
41	Medscape	Carpal Tunnel Release   Surgical Procedure   Part I	https://www.youtube.com/watch?v=VROrnggbsek
42	Massage Therapeutics	Forearm Anatomy: Help Relieve Carpal Tunnel Syndrome	https://www.youtube.com/watch?v=Kx9-ZDWmzKw
43	3dmusclepep	3D CGI medical video carpal tunnel syndrome	https://www.youtube.com/watch?v=u5dWTGYQ6PU
44	Malek Racy	Carpal Tunnel Release - Teaching Video	https://www.youtube.com/watch?v=bLYLVNjP7H8
45	MedStar Health	Surgery Video: Carpal Tunnel - MedStar Union Memorial	https://www.youtube.com/watch?v=jiUKeCLMS90
46	CinnamonToastKen	Carpal Tunnel Surgery	https://www.youtube.com/watch?v=P1sUe7g_9L0
47	Adam J. Story, DC	Carpal Tunnel Fix - DIY No brace!!	https://www.youtube.com/watch?v=B9a8u16hIhQ
48	John Mahoney	Carpal Tunnel Release for carpal tunnel syndrome, by John Mahoney, M.D., more at www.DoctorMahoney.com	https://www.youtube.com/watch?v=xuqcfRG2phk
49	nandapillai	Carpal Tunnel Syndrome Operation	https://www.youtube.com/watch?v=lxqqX2pDryQ
50	handarmdoc	Recognizing Thumb Muscle Atrophy - Carpal Tunnel Syndrome	https://www.youtube.com/watch?v=ffCnKlZVJvQ
51	Bob & Brad	Top 3 Exercises to Perform AFTER Carpal Tunnel Surgery (Release)	https://www.youtube.com/watch?v=z7mGU7877SE
52	JoeCubicle	One month after carpal tunnel surgery	https://www.youtube.com/watch?v=MjjnVx65Wyg
53	CarpalRx	Early symptoms and warning signs of carpal tunnel syndrome	https://www.youtube.com/watch?v=rnZEwSAYCdU

54	Rehab and Revive	5 Exercises to PREVENT and ALLEVIATE Carpal Tunnel	https://www.youtube.com/watch?v=pbHRK7jpr1M
55	Coordinated Health	Carpal Tunnel Release - Dr. Jon Hernandez	https://www.youtube.com/watch?v=t6DWcLKygpY

# Supplementary Table 2. Overview of the raw scores for each video included in the study

Authorists   Authorists   Authorists   Carrest   Decision of the product Sea alive   Network   Network   Suggest for cargul   1		Raw scores of videos																									
Network   Podeste See a live		Channel Name	Video Title					0	0	0	0	0		0	0	0			р О1	01	01	01	01	01	01	01	Q2
Network   Surgery for carpal   1	cı							1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9	0
Devid	1	BroadcastMed	Podcast: See a live																								
David Nuckbermann   Cescretes for tendimits   Cendonicis and carpal   Campal Tunnel (cps)   Cendonicis and carpal   Campal Tunnel (cps)   Campal Tunnel Relief   Campal Tunnel   Campal		Network	surgery for carpal	1	1	1	0	1			1											1	1				
Kisckhermann   (tendonits) and carpal   0			tunnel syndrome																								
Cendomitis) and carpal   O	2	David Kuckhermann	exercises for tendinitis																								
3   Dr. Josh Axe		Ruckiermann	(tendonitis) and carpal	0	0	1	0					1						1									1
Carpal Tunnel Relief   in 24 Hours   Dr. Josh   Axe			tunnel (cps)																								
1	3	Dr. Josh Axe	How to Get Natural																								<u> </u>
Axe			Carpal Tunnel Relief																								1
Axe			in 24 Hours   Dr. Josh	0	0	1	1				1																
Tunnel			Axe																								
Tunnel	4	KT Tape	KT Tape: Carpal																								
Media   Syndrome   Nucleus   1			Tunnel	1	0	1	0	1			1										1						
Health	5	Nucleus Medical	Carpal Tunnel																								i
Madden Physical   Top 3 Exercises for   Therapy   Carpal Tunnel   1   0   1   0   1   1   1   1   1   1		Media	Syndrome   Nucleus	1	0	1	0	1	1	1	1	1						1		1	1	1	1	1			
Therapy   Carpal Tunnel   1			Health																								
Syndrome	6	Madden Physical	Top 3 Exercises for																								
Tunnel? Try 3 Simple		Therapy	Carpal Tunnel	1	0	1	0	1		1	1		1					1			1						
Tunnel? Try 3 Simple   1			Syndrome																								
Stretches	7	Cleveland Clinic	Worried About Carpal																								
8 AskDoctorJo 5 Best Carpal Tunnel Syndrome Stretches & Exercises - Ask Doctor Jo  9 LoseTheBackPai Self Acupressure for n Carpal Tunnel 0 0 0 1 1 1 1 1 1 1 1			Tunnel? Try 3 Simple	1	1	1	0					1						1									1
Syndrome Stretches &			Stretches																								
Exercises - Ask Doctor	8	AskDoctorJo	5 Best Carpal Tunnel																								
Exercises - Ask Doctor Jo  9 LoseTheBackPai Self Acupressure for n Carpal Tunnel 0 0 1 1 1 1 1 1			Syndrome Stretches &																								
Jo			Exercises - Ask Doctor	1	0	1	0	1			1	1					1	1									
9 LoseTheBackPai Self Acupressure for n Carpal Tunnel 0 0 1 1 1 1 1 1 1																											
n Carpal Tunnel 0 0 1 1 1 1 1 1 1		I THE DIE:																									
	9																										
		n		0	0	1	1	1				1						1									
			Syndrome																								

10	Dr Thomas	Live Surgery Open																					
	McClellan	Carpal Tunnel Release	1	1	1	0	1	1	1	1					1	1	1	1	1	1	1	1	
		Surgery.m4v																					
11	Armando	Clinical Anatomy -																					$\vdash \vdash$
11		Hand, Wrist (palmar	1	1	1	0	1	1	1	1													
	Hasudungan	_	1	1	1	U	1	1	1	1													
		aspect/flexors)																					
12	HM Massage	Carpal Tunnel Self	0	0	1	0	1		1	1	1				1								
		Massage Fix																					
13	TheProactiveAthl	Carpal Tunnel	1	0	1	0	1	1		1	1				1								
	ete	Syndrome Exercises	1	0	1	U	1	1		1	1				1								
14	j7conley	Carpal Tunnel																					$\vdash$
		Treatment - Relief	0	0	1	0	1	1	1	1	1				1	1	1	1					
		Without Surgery																					
15	Blitz Esports	Carpal Tunnel in																					$\vdash$
1.5	LoL	Esports, explained in 5	1	0	1	0	1		1	1	1				1	1	1	1				1	
	LOL		1	0	1	0	1		1	1	1				1	1	1	1				1	
		minutes																					
16	WorkSafeBC	Carpal Tunnel	0	0	1	0	1	1	1	1	1												
		Syndrome																					
17	TheSurgerySqua	Carpal Tunnel Surgery	1	1	1	0	1		1	1	1							1	1			1	1
	d		•		•		•		•	•								-				•	
18	Physiotutors	Phalen's Test   Carpal		_		_																	
		Tunnel Syndrome	1	0	1	0			1			1											
19	Carpal Tunnel	Carpal Tunnel																					$\vdash$
	Gadgets	Exercises using Stress	0	0	1	0											1						
		Ball																					
20	Physiotutors	Tinel Sign:																					Ш
20	Filysiotutors	Wrist Carpal Tunnel																					
			1	0	1	0						1											
		Syndrome																					
21	Road	Wrist Exercises for																					
		Tendinitis Carpal																					
		Tunnel Syndrome -	0	1	1	0	1			1	1												
		Avoid RSI injury in																					
		just 2 minutes a day!																					
				<u> </u>	<u> </u>	l .		<u> </u>										L					

22	Bob & Brad	Carpal Tunnel? Avoid																					
		Surgery with 3 Step Self-Treatment	1	1	1	0	1		1	1	1					1		1					
		Program																					
23	ZHealthPerforma	Carpal Tunnel Relief	0	0	1	0	1				1					1							
	nce	Exercises	· ·	V	1	O .	1				•					•							
24	Carpal Tunnel	Hand Massage for																					
	Gadgets	Carpal Tunnel	0	0	1	0										1							
		Syndrome																					
25	Dr Levi Harrison	Is It Carpal Tunnel																					
		Syndrome OR	1	1	1	0	1		1	1	1					1	1	1	1				
		Tendonitis?																					
26	Yoga with	Yoga for Wrists &																					
	Kassandra	Fingers - Yoga for	0	0	1	0										1							
		Wrist Cramps &		0	1	O										1							
		Carpal Tunnel																					
27	nabil ebraheim	Carpal Tunnel																					
		Syndrome -																					
		Everything You Need	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		
		To Know - Dr. Nabil																					
		Ebraheim																					
28	Dr Joseph	*HUGE* Carpal																					
	Cipriano DC	Tunnel Syndrome																					
		RELEASE with	1	0	1	0	1		1	1	1				1			1					
		CHIROPRACTIC																					
		Adjustment																					
29	Bob & Brad	Best Sleeping Position																					
		for Shoulder, Arm, &																					
		Wrist Pain- also	1	0	1	0												1				1	
		Carpal Tunnel																					
		Syndrome																					
L	l .	l		<u> </u>	l									1				L	1	l			

30 V	Vitality Massage	Massage for Carpal																				
		Tunnel Syndrome -	0	0	1	0	1								1							
		STOP Wrist Pain Fast!			•		•								•							
31 n	motivationaldoc	Carpal Tunnel Self-																				
		Correction Adjustment	1	0	1	0	1		1	1	1				1				1			
		- Dr. Alan Mandell,																				
		D.C.																				
32 E	Bob & Brad	What They Don't Tell																				
		You About Carpal																				
		Tunnel Syndrome!	1	0	1	0	1		1	1	1	1		1	1			1	1			
		Stretches &																				
		Treatments																				
33 F	RMCrayne	Carpal Tunnel																				
33 P	KiviCiayiic	_																				
		Syndrome Provocative	1	0	1	0	1			1		1										
		Tests & Physical																				
		Exam																				
34 E	EkhartYoga	Yoga Exercises for																				
		Carpal Tunnel	0	0	1	0									1							
		Syndrome																				
35 N	Mr Jeremy Read	Carpal tunnel release																				
I	Hand Surgeon		1	0	1	0													1	1		1
36 n	nabil ebraheim	Carpal Tunnel																				
		Injection - Everything																				
		You Need To Know -	1	1	1	1	1		1	1	1				1							
		Dr. Nabil Ebraheim																				
37 n	motivationaldoc	How to Determine if																				
		You Really Have																				
		Carpal Tunnel	1	1	1	0	1	1	1	1	1	1			1							
		Syndrome - Dr																				
		Mandell, DC																				
38 n	motivationaldoc	Carpal Tunnel																				
		Syndrome: Fast	1	1	1	0	1	1	1	1	1	1			1	1	1	1	1			
			i	ı	1	l l													l			
		Natural Relief in																				

Supplemental material

		Minutes - Dr Alan																					
		Mandell, DC																					
39	Jedediah Jones	Hand Exam For Carpal	1	1	1	0	1		1	1		1											
		Tunnel Syndrome	•	1	•	Ü	•		•	•		•											
40	PreOp.com	Carpal Tunnel																					
	Patient	Syndrome Repair																					
	Engagement -	Surgery - PreOp®	1	0	1	0	1		1	1	1							1	1				
	Patient Education	Patient Education																					
		Medical HD																					
41	Medscape	Carpal Tunnel Release																					
		Surgical Procedure	1	0	1	0												1	1				
		Part I																					
42	Massage	Forearm Anatomy:																					
	Therapeutics	Help Relieve Carpal	1	0	1	0	1		1	1					1		1						
		Tunnel Syndrome																					
43	3dmusclepep	3D CGI medical video																					
		carpal tunnel	0	0	1	0	1		1	1													
		syndrome																					
44	Malek Racy	Carpal Tunnel Release	1	1	1	1	1		1	1	1							1	1				
		- Teaching Video	1			1																	
45	MedStar Health	Surgery Video: Carpal																					
		Tunnel - MedStar	1	1	1	1	1	1	1	1	1				1	1	1	1		1	1	1	1
		Union Memorial																					
46	CinnamonToastK	Carpal Tunnel Surgery	0	0	1	0	1	1	1	1	1							1	1				1
	en				•	Ü	•	•	•	•	•							•	•				•
47	Adam J. Story,	Carpal Tunnel Fix -	0	0	1	0	1		1	1				1	1		1						
	DC	DIY No brace!!			1	O .			1	1				1	1		1						
48	John Mahoney	Carpal Tunnel Release																					
		for carpal tunnel																					
		syndrome, by John	0	0	1	0												1	1				
		Mahoney, M.D., more																					
		at																					
				I	l														1				l

		www.DoctorMahoney.																			
		com																			
49	nandapillai	Carpal Tunnel Syndrome Operation	1	1	1	0		1	1								1	1			
50	handarmdoc	Recognizing Thumb  Muscle Atrophy -  Carpal Tunnel  Syndrome	1	1	1	0	1	1	1		1						1				
51	Bob & Brad	Top 3 Exercises to Perform AFTER Carpal Tunnel Surgery (Release)	1	1	1	0											1			1	1
52	JoeCubicle	One month after carpal tunnel surgery	0	0	1	0	1										1				
53	CarpalRx	Early symptoms and warning signs of carpal tunnel syndrome	0	0	1	0	1	1	1	1				1		1	1				
54	Rehab and Revive	5 Exercises to PREVENT and ALLEVIATE Carpal Tunnel	1	0	1	0	1	1	1					1							
55	Coordinated Health	- Dr. Jon Hernandez	1		1	1	1	1									1		1		

<sup>&</sup>lt;sup>a</sup>JAMA benchmark criteria assigned 1 point if each criterion is met, and 0 if not.

<sup>&</sup>lt;sup>b</sup>CTS-SS assigned 1 point if each item is applicable.