

Supplementary File 1: Search Strategy

Search strategies:

Embase (Ovid)	(exercise OR exercise*.mp OR "isometric exercise" OR kinesiotherapy OR Eccentric.mp OR concentric.mp OR "heavy slow resistance".mp OR "isokinetic exercise" OR plyometrics OR "muscle stretching" OR "muscle training") AND (tendinitis OR Tendinopathy.mp OR "tendon injury" OR "shoulder injury" OR "rotator cuff injury" OR "tennis elbow" OR tendin.mp OR tendon.mp OR bursitis OR "shoulder impingement syndrome" OR 2posterior tibial tendon dysfunction" OR "Greater trochanteric pain syndrome".mp)
CINAHL (EBSCO-host)	(MH Exercise OR AB exercise* OR MH "muscle strengthening" OR MH "rehabilitation" OR MH "eccentric contraction" OR TX "heavy slow resistance exercis*" OR AB eccentric OR AB concentric OR AB isokinetic OR MH "therapeutic exercise") AND (MH tendinopathy OR MH "arm injuries" OR "tendon injuries" OR MH tendons OR TX tendin* OR TX tendon* OR AB bursitis OR MH Bursitis OR MH "Posterior tibial tendon dysfunction" OR MH "shoulder impingement syndrome" OR AB "Greater trochanteric pain syndrome")
Medline (EBSCO-host)	(MH exercise OR AB exercise* OR MH "isometric contraction" OR MH rehabilitation OR TX eccentric OR TX concentric OR TX "heavy slow resistance" OR TX isokinetic) AND (MH tendinopathy OR MH "shoulder injuries" OR MH tendons OR MH "tendon injuries OR TX tendin* OR tendon* OR MH bursitis OR AB bursitis OR MH "posterior tibial tendon dysfunction" OR MH "shoulder impingement syndrome" OR AB "greater trochanteric pain syndrome")
SPORTDiscus (EBSCO-host)	(DE exercise OR DE "exercise therapy" OR AB exercise* OR TX eccentric OR TX concentric OR TX "heavy slow resistance" OR DE "isokinetic exercise" OR DE plyometrics OR DE "strength training" OR DE "stretch (physiology)" OR DE "isometric exercise" OR DE rehabilitation) AND (DE tendinitis OR DE tendinosis OR AB tendinopathy OR DE "tendon injuries" OR "shoulder injuries" OR DE "tennis elbow" OR AB tendin* OR AB tendon* OR DE bursitis OR AB "shoulder impingement syndrome" OR AB "posterior tibial tendon dysfunction" OR AB "greater trochanteric pain syndrome")
Amed (EBSCO-host)	(ZU exercise OR ZU "exercise therapy" OR AB exercise OR ZU "muscle stretching exercises" OR ZU "isometric contraction" OR ZU rehabilitation OR TZ eccentric OR TZ concentric OR TX "heavy slow resistance" OR TX isokinetic OR AB plyometric) AND (ZU tendinopathy OR ZU "tendon injuries" OR ZU tendons OR ZU "shoulder injuries" OR ZU "tennis elbow" OR TX tendin* OR TX tendon* OR ZU bursitis OR AB bursitis OR ZU "shoulder impingement syndrome" OR ZU "posterior tibial tendon dysfunction" OR AB "greater trochanteric pain syndrome")
Open Grey	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
Mednar	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
New York Academy Grey Literature Report	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise

ETHOS	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
Google Scholar	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
JB1 Evidence Synthesis	Tendinopathy AND exercise
Cochrane Library	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
PEDro	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
Epistemonikos	(tendinopathy OR tendon* OR tendin*) AND exercise
CORE	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
Clinicaltrials.gov	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
ISRCTN	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
EU CTR	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise
ANZCTR	Tendinopathy AND exercise Tendin* AND exercise Tendon AND exercise

ISRCTN – the Research Registry; EU CTN – European Clinical Trials Registry; ANZCTR – Australia and New Zealand Clinical Trials Registry

Supplementary File 2: Excluded Reference List

Exclusion reason	Full reference
Before 1998	Lowdon A, Bader DL, Mowat, AG. The effect of heel pads on the treatment of Achilles tendinitis: a double blind trial. <i>The American Journal of Sports Medicine</i> 1984;12: 431-5. doi:10.1177/036354658401200605. [Accessed July 2020].
Before 1998	Niesen-Vertommen S, Taunton JE, Clement DB, et al. The effect of eccentric versus concentric exercise in the management of Achilles tendonitis. <i>Clin J Sport Med</i> 1992;2: 109-113. [Accessed July 2020].
Before 1998	Downing DS, Weinstein A. Ultrasound therapy of subacromial bursitis. A double blind trial. <i>Physical Therapy</i> 1986;66: 194-6. doi:10.1093/ptj/66.2.194. [Accessed July 2020].
Before 1998	Brox JI, Staff PH, Ljunggren AE, et al. Arthroscopic surgery compared with supervised exercises in patients with rotator cuff disease (stage II impingement syndrome). <i>BMJ (Clinical research ed.)</i> 1993;307: 899-903. doi:10.1136/bmj.307.6909.899. [Accessed July 2020].
Before 1998	Jensen K, Di Fabio, RP. Evaluation of eccentric exercise in treatment of patellar tendinitis. <i>Physical Therapy</i> 1989;69: 211-216. doi:10.1093/ptj/69.3.211. [Accessed July 2020].
Before 1998	Stanish WD, Rubinovich RM, Curwin S, et al. Eccentric exercise in chronic tendinitis. <i>Clin Orthop Relat Res</i> 1986;208: 65-68. [Accessed July 2020].
Before 1998	Herbert RD. A systematic review and meta-analysis of clinical trials on physical interventions for lateral epicondylalgia: Commentary. <i>Br J Sports Med</i> 2005;39: 411-422. doi:10.1136/bjsm.2004.016170. [Accessed July 2020].
Before 1998	Brox JI, Gjengedal E, Uppheim G, et al. Arthroscopic surgery compared with supervised exercises in patients with rotator tendinosis. <i>Acta Orthopaedica Scandinavica</i> 1996;67: 25. [Accessed July 2020].
Before 1998	Green S, Buchbinder R, Hetrick SE. Physiotherapy interventions for shoulder pain. <i>Cochrane Database of Systematic Reviews</i> 2003;2: CD004258. doi:10.1002/14651858.CD004258. [Accessed July 2020].
Clinical trial that never published	NTR4916 (van der Vlist AC). High-Volume Image-Guided Injection in chronic midportion Achilles tendinopathy. 2014. Available: https://clinicaltrials.gov/ct2/show/NCT02996409 [Accessed July 2020].

Clinical trial that never published	NCT03133416 (Hsieh L-F). Platelet-rich Plasma Injections and Physiotherapy in the Treatment of Chronic Rotator Cuff Tendinopathy. Available: https://clinicaltrials.gov/ct2/show/NCT03133416 [Accessed July 2020].
Clinical trial that never published	Blasimann A, Eichelberger P, Brühlhart Y, et al. Non-surgical treatment of pain associated with posterior tibial tendon dysfunction: study protocol for a randomised clinical trial. <i>Journal of foot and ankle research</i> 2015;8: 37. doi:10.1186/s13047-015-0095-4. [Accessed July 2020].
Clinical trial that never published	de Oliveira FCL, de Fontenay BP, Bouyer LJ, et al. Effects of kinesiotaping added to a rehabilitation programme for patients with rotator cuff tendinopathy: protocol for a single-blind, randomised controlled trial addressing symptoms, functional limitations and underlying deficits. <i>BMJ Open</i> 2017;7: e017951. doi:10.1136/bmjopen-2017-017951. [Accessed July 2020].
Clinical trial that never published	NCT02521298 (Doessing S). Treatment of Lateral Elbow Tendinopathy. 2015. Available: https://clinicaltrials.gov/ct2/show/NCT02521298 [Accessed July 2020].
Clinical trial that never published	NTR6576 (Verhagen E). Self-myofascial release therapy and Achilles tendon complaints. 2017. Available: https://www.trialregister.nl/trial/6401 [Accessed July 2020].
Clinical trial that never published	EUCTR2018-002822-22-NL (Smulders K). Needling in patients with tennis elbow. 2018. Available: https://www.clinicaltrialsregister.eu/ctr-search/trial/2018-002822-22/NL [Accessed July 2020].
Clinical trial that never published	NCT02304003 (Haslerud S). The Effect of an Evidence-based Physiotherapy Regimen for Patients With Rotator Cuff Tendinopathy. 2014. Available: https://clinicaltrials.gov/ct2/show/NCT02304003 [Accessed July 2020].
Clinical trial that never published	NCT03571971 (Di Stasi S). Load Modification Versus Standard Exercise for Greater Trochanteric Pain Syndrome. 2018. Available: https://clinicaltrials.gov/ct2/show/NCT03571971 [Accessed July 2020].
Clinical trial that never published	ISRCTN11851359 (Veto J). Treating Achilles tendon pain. 2017. Available: https://www.isrctn.com/ISRCTN11851359?q=ISRCTN11851359&filters=&sort=&offset=1&totalResults=1&page=1&pageSize=10&searchType=basic-search [Accessed July 2020].
Clinical trial that never published	NCT03743441 (Naterstad IF). Physiotherapy Treatment for Chronic Achilles Tendinopathy (PhyCAT). 2018. Available: https://clinicaltrials.gov/ct2/show/NCT03743441 [Accessed July 2020].

Clinical trial that never published	NCT03853122 (Cuesta-Vargas AI). Exercise With Individual Dosage Against the Best Current Practice in Lower Limb Tendinopathy (MaLaGa Trial). 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03853122 [Accessed July 2020].
Clinical trial that never published	NCT04289610 (Karasu AU). Transcutaneous Pulse Radiofrequency Treatment for Subacromial Impingement Syndrome. 2020. Available: https://clinicaltrials.gov/ct2/show/NCT04289610 [Accessed July 2020].
Clinical trial that never published	ChiCTR-IOR-17012630 (Teng LH). The effect of scapular-focused programme for patients with rotator cuff tendinopathy and scapular dyskinesis. 2017. Available: http://www.chictr.org.cn/showproj.aspx?proj=21559 [Accessed July 2020].
Clinical trial that never published	NCT03939247 (Demoulin C). Effectiveness of the "Tecaretherapy" in Patients With Lateral Elbow Tendinopathy. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03939247 [Accessed July 2020].
Clinical trial that never published	Keene DJ, Soutakbar H, Hopewell S. Development and implementation of the physiotherapy-led exercise interventions for the treatment of rotator cuff disorders for the 'Getting it Right: Addressing Shoulder Pain' (GRASP) trial. <i>Physiotherapy</i> 2020;107: 252-266. doi:10.1016/j.physio.2019.07.002. [Accessed July 2020].
Clinical trial that never published	NCT04059146 (Chimenti R). Tendinopathy Education on the Achilles (TEAch). 2019. Available: https://clinicaltrials.gov/ct2/show/NCT04059146 [Accessed July 2020].
Clinical trial that never published	EUCTR2015-000196-27-GB (Burtles S). Tendinopathy treatment effects and mechanisms 1 (TEAM 1). 2015. Available: https://www.clinicaltrialsregister.eu/ctr-search/trial/2015-000196-27/GB [Accessed July 2020].
Clinical trial that never published	ISRCTN16539266 (Hopewell S). GRASP - Getting it right: addressing shoulder pain. 2016. Available: https://www.isrctn.com/ISRCTN16539266?q=ISRCTN16539266&filters=&sort=&offset=1&totalResults=1&page=1&pageSize=10&searchType=basic-search [Accessed July 2020].
Clinical trial that never published	NCT03968614 (Dunning J). Electrical DN as an Adjunct to Eccentric Exercise, Stretching + MT for Achilles Tendinopathy. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03968614 [Accessed July 2020].

Clinical trial that never published	EUCTR2010-021869-73-NL (OrthoCell Pty Ltd). The value of Autologous Tenocyte Implantation in patients with chronic Achilles tendinopathy: a double-blind randomised clinical trial - ATI in Achilles tendinopathy. 2010. Available: https://www.clinicaltrialsregister.eu/ctr-search/trial/2010-021869-73/NL [Accessed July 2020].
Clinical trial that never published	NCT02499484 (French H, Duffy T). Topical Glyceryl Trinitrate (GTN) and Eccentric Exercises in the Treatment of Midportion Achilles Tendinopathy (NEAT). 2015. Available: https://clinicaltrials.gov/ct2/show/NCT02499484 [Accessed July 2020].
Clinical trial that never published	NCT02971072 (Karduna AR). Neurophysiology of Weakness and Exercise in Rotator Cuff Tendinopathy. 2020. Available: https://clinicaltrials.gov/ct2/show/NCT02971072 [Accessed July 2020].
Clinical trial that never published	DRKS00014594 (Gatz M). Evaluation of Extracorporeal Shockwave Therapy (ESWT) in Achilles tendinopathy using Shear Wave Elastography (SWE) and Ultrasound Tissue Characterisation (UTC): a single-blinded, placebo-controlled randomised clinical trial. 2018. Available: https://www.drks.de/drks_web/navigate.do?navigationId=trial.HTML&TRIAL_ID=DRKS00014594 [Accessed July 2020].
Clinical trial that never published	NCT03834090 (Corum, M). Effectiveness of Radial Extracorporeal Shock Wave Therapy and Supervised Exercises in Lateral Epicondylitis. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03834090 [Accessed July 2020].
Clinical trial that never published	RBR-9vjfmz (Pinfildi CE). Photobiomodulation associated with short-term Eccentric Exercise Protocol on pain intensity and function in patients with Lower Limb Tendinopathy. 2018. Available: https://ensaioclinicos.gov.br/trial/6135/1 [Accessed July 2020].
Clinical trial that never published	NCT03184181 (Huguet MR). Effectiveness of Therapeutic Percutaneous Electrolysis in Persons With the Treatment of Supraspinatus Tendinopathy (MRH-EPTE). 2017. Available: https://clinicaltrials.gov/ct2/show/NCT03184181 [Accessed July 2020].
Clinical trial that never published	NCT04210999 (Doessing S). Resistance Training and Injection Treatment for Chronic Achilles Tendinopathy. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT04210999 [Accessed July 2020].

Clinical trial that never published	NCT02938143 (Oei E). Exercise Therapy for Patellar Tendinopathy Evaluated With Advanced UTE-MRI. 2016. Available: https://clinicaltrials.gov/ct2/show/NCT02938143 [Accessed July 2020].
Clinical trial that never published	NCT04175184 (Baeske R). Inclusion of Mobilisation With Movement to an Exercise Programme in Rotator Cuff Related Pain. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT04175184 [Accessed July 2020].
Clinical trial that never published	NCT02546128 (Wheeler P). LEICeSter Tendon Extracorporeal Shockwave Studies. 2015. Available: https://clinicaltrials.gov/ct2/show/NCT02546128 [Accessed July 2020].
Clinical trial that never published	Rabusin C, Menz H, McClelland J, et al. Efficacy of heel lifts in the treatment of mid-portion Achilles tendinopathy: a randomised trial. <i>Journal of Science and Medicine in Sport</i> 2018;21:1 S10. doi: https://doi.org/10.1016/j.jsams.2018.09.026 . [Accessed July 2020].
Clinical trial that never published	NCT03515148 (Martin PJ). Effectiveness of EE With Vibration Versus Cryotherapy in Rectus Abdomini Muscle Thickness and Inter-recti Distance. 2018. Available: https://clinicaltrials.gov/ct2/show/NCT03515148 [Accessed July 2020].
Clinical trial that never published	NCT02732782 (Radoanovic G). Effectiveness of Isometric vs. Eccentric Exercise in Chronic Achilles Tendinopathy. 2016. Available: https://clinicaltrials.gov/ct2/show/NCT02732782 [Accessed July 2020].
Clinical trial that never published	RBR-9yrydw (Daitx RB). Effect of laser on shoulder tendinitis. 2019. Available: https://ensaiosclinicos.gov.br/rg/RBR-9yrydw [Accessed July 2020].
Clinical trial that never published	NCT04073212 (McDevitt AW). Dry Needling and Exercise Versus Traditional Physical Therapy for Biceps Tendinitis. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT04073212 [Accessed July 2020].
Clinical trial that never published	NCT03984955 (Watts AC). Comparing Injection Treatments for Tennis Elbow. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03984955 [Accessed July 2020].
Clinical trial that never published	ISRCTN07165558 (Bombin V). The Efficacy of Acupuncture in Chronic Rotator Cuff Tendinitis. 2010. Available: https://www.isrctn.com/ISRCTN07165558?q=ISRCTN07165558&filters=&sort=&offset=1&totalResults=1&page=1&pageSize=10&searchType=basic-search [Accessed July 2020].
Clinical trial that never published	NCT03029910 (Martin PJ). Eccentric Training and Cryotherapy Vs Eccentric Training and Whole Body Vibration in Achilles Tendinopathy. 2017. Available: https://www.clinicaltrials.gov/ct2/show/results/NCT03029910?view=results [Accessed July 2020].

Clinical trial that never published	NCT03694730 (University of Delaware). Continued Activity During Rehabilitation in Patients With Patellar Tendinopathy. 2018. Available: https://clinicaltrials.gov/ct2/show/NCT03694730 [Accessed July 2020].
Clinical trial that never published	NTR5813 (Breuer MAW). A tailor made exercise program versus a standard exercise program in patients with chronic mid portion achillestendinopathy. 2016. Available: https://www.trialregister.nl/trial/5491 [Accessed July 2020].
Clinical trial that never published	NCT03747549 (O'Callaghan M). Acupuncture for Insertional Achilles Tendinopathy Effectiveness. 2018. Available: https://clinicaltrials.gov/ct2/show/NCT03747549 [Accessed July 2020].
Clinical trial that never published	NTR6314 (Rabello LM). Comparison of two exercise protocols for insertional Achilles tendinopathy rehabilitation. 2017. Available: https://www.trialregister.nl/trial/6167 [Accessed July 2020].
Clinical trial that never published	NCT02580630 (Johannsen FE). Achilles Tendinopathy Treated With Training and Injections. 2015. Available: https://clinicaltrials.gov/ct2/show/NCT02580630 [Accessed July 2020].
Clinical trial that never published	DRKS00011596 (Steiner B). Evaluation of the effectiveness and costs of home tele-rehabilitation with AGT-Reha in comparison to medical exercise therapy. 2017. Available: https://www.drks.de/drks_web/navigate.do?navigationId=trial.HTML&TRIAL_ID=DRKS00011596 [Accessed July 2020].
Clinical trial that never published	NCT00782522 (Cools A). Effect Study of an Eccentric Training Program and Stretching for Patients With Chronical Rotator Cuff Tendinopathy. 2008. Available: https://clinicaltrials.gov/ct2/show/NCT00782522 [Accessed July 2020].
Clinical trial that never published	NCT03892603 (Roy JS). Does The Type of Exercise Influence Outcome in Rotator Cuff Related Shoulder Pain. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03892603 [Accessed July 2020].
Clinical trial that never published	NCT01423682 (Cools A). The Influence of Eccentric Training on the Volume and Vascularisation of the Rotator Cuff in Patients With Rotator Cuff Tendinopathy and Healthy Subjects. 2011. Available: https://clinicaltrials.gov/ct2/show/NCT01423682 [Accessed July 2020].
Clinical trial that never published	NCT01225497 (Stevens M). Eccentric Exercise for Chronic Mid-portion Achilles Tendinopathy. 2010. Available: https://clinicaltrials.gov/ct2/show/NCT01225497?cond=Eccentric+Exercise+

	for+Chronic+Mid-portion+Achilles+Tendinopathy&draw=2&rank=1 [Accessed July 2020].
Clinical trial that never published	NCT02833779 (Garcia MS). Trial to Compare the Effectiveness of Group Versus Individual Therapy on Alternate Days in Patients With Subacromial Impingement Syndrome. 2016. Available: https://clinicaltrials.gov/ct2/show/NCT02833779 [Accessed July 2020].
Clinical trial that never published	NCT03996928 (Casero AO). Eccentric Exercise in Epicondylitis. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03996928?cond=Eccentric+Exercise+in+Epicondylitis&draw=2&rank=1 [Accessed July 2020].
Clinical trial that never published	NCT03675399 (Bernat MBI). Effect of Isometric Exercise on Pain Perception in Rotator Cuff Related Shoulder Pain. 2018. Available: https://clinicaltrials.gov/ct2/show/NCT03675399?cond=Effect+of+Isometric+Exercise+on+Pain+Perception+in+Rotator+Cuff+Related+Shoulder+Pain&draw=2&rank=1 [Accessed July 2020].
Clinical trial that never published	NCT03196063 (Cabral CMN). Effectiveness of Two Exercise Protocols in the Treatment of Patients With Patellar Tendinopathy. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03196063?cond=Effectiveness+of+Two+Exercise+Protocols+in+the+Treatment+of+Patients+With+Patellar+Tendinopathy&draw=2&rank=1 [Accessed July 2020].
Clinical trial that never published	NCT03196063 (Cabral CMN). Effectiveness of Two Exercise Protocols in the Treatment of Patients With Patellar Tendinopathy. 2017. Available: https://clinicaltrials.gov/ct2/show/NCT03196063 [Accessed July 2020].
Clinical trial that never published	NCT02996409 (van der Vlist AC). High-Volume Image-Guided Injection in Chronic Midportion Achilles Tendinopathy (HAT). 2016. Available: https://clinicaltrials.gov/ct2/show/NCT02996409 [Accessed July 2020].
Clinical trial that never published	ChiCTR1900022882 (Li Y). A randomized controlled study for extracorporeal shock wave combined with peri-hip muscle training in the treatment of patellar tendinosis. 2019. Available: http://www.chictr.org.cn/hvshowproject.aspx?id=17429 [Accessed July 2020].
Clinical trial that never published	ACTRN12616001676404 (Kinsella R). A pilot randomised controlled trial comparing three different physiotherapy interventions to treat rotator cuff tendinopathy/subacromial pain syndrome. 2016. Available: https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?ACTRN=12616001676404 [Accessed July 2020].

Clinical trial that never published	NTR5638 (Huisstede BMA). Comparison of two different exercise programs in mid-portion Achilles tendinopathy: a randomized trial. 2016. Available: https://www.trialregister.nl/trial/5503 [Accessed July 2020].
Clinical trial that never published	ACTRN12619001648112 (Malliaras P). Telerehabilitation and internet-based management of rotator cuff related pain: a pilot and feasibility randomised controlled trial. 2019. Available: https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?id=378745&isReview=true [Accessed July 2020].
Clinical trial that never published	ACTRN12619001358134 (Malliaras P). Internet-based management of rotator cuff disease: a pilot and feasibility randomised controlled trial. 2019. Available: https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?id=378401&isReview=true [Accessed July 2020].
Clinical trial that never published	ACTRN12619000045112 (Koc C). The Effect of Balneotherapy on Treatment of Suraspinatus Tendinitis. 2019. Available: https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?id=376643&isReview=true [Accessed July 2020].
Clinical trial that never published	ACTRN12617001225303 (Munteanu S). Heel lift shoe inserts versus calf muscle eccentric exercise for Achilles tendinopathy. 2017. Available: https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?id=373488&isReview=true [Accessed July 2020].
Clinical trial that never published	ACTRN12617000675325 (Murphy M). The relationship between changes in the neural mechanisms associated with pain and the improvement in clinical symptoms of Achilles tendon pain. 2017. Available: https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?id=372886&isReview=true [Accessed July 2020].
Clinical trial that never published	ACTRN12615000764538 (Chen J). Preoperative group shoulder program for patients awaiting shoulder surgery. 2015. Available: https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?id=368833&isReview=true [Accessed July 2020].
Clinical trial that never published	NCT01902433 (Slaven E). Astym® Compared Eccentric Exercise for Chronic Mid-substance Achilles Tendinopathy. 2017. Available: https://clinicaltrials.gov/ct2/show/NCT01902433?cond=Compared+Eccentric+Exercise+for+Chronic+Mid-substance+Achilles+Tendinopathy&draw=2&rank=1 [Accessed July 2020].
Clinical trial that never published	NCT01902433 (Slaven E). Astym® Compared Eccentric Exercise for Chronic Mid-substance Achilles Tendinopathy. 2013. Available: https://clinicaltrials.gov/ct2/show/NCT01902433?cond=Compared+Eccentric

	c+Exercise+for+Chronic+Mid-substance+Achilles+Tendinopathy&draw=2&rank=1 [Accessed July 2020].
Clinical trial that never published	NCT00764764 (Vaughan CK). Study of the Effect of Neck Treatment on Shoulder Impingement. 2008. Available: https://clinicaltrials.gov/ct2/show/NCT00764764?cond=NCT00764764&draw=2&rank=1 [Accessed July 2020].
Clinical trial that never published	NCT02116946 (Scott A). Plasma Injections Plus Exercise for Patellar Tendinopathy (PHS). 2014. Available: https://clinicaltrials.gov/ct2/show/NCT02116946?cond=NCT02116946&draw=2&rank=1 [Accessed July 2020].
Clinical trial that never published	NCT02241148 (Cavazos FV). Close Kinect Chain Exercise With Kinesio Taping in the Management of Patellofemoral Pain Syndrome. 2014. Available: https://clinicaltrials.gov/ct2/show/NCT02241148 [Accessed July 2020].
Clinical trial that never published	NCT03264326 (Whitehurst RA). Efficacy of BFR Training Combined With Eccentric Exercise as Assessed by SWE in Subjects With Chronic AT. 2019. Available: https://clinicaltrials.gov/ct2/show/NCT03264326 [Accessed July 2020].
Clinical trial that never published	NCT03264326 (Whitehurst RA). Efficacy of BFR Training Combined With Eccentric Exercise as Assessed by SWE in Subjects With Chronic AT. 2017. Available: https://clinicaltrials.gov/ct2/show/NCT03264326 [Accessed July 2020].
Clinical trial that never published	NCT02092272 (McKeown C). Eccentric Exercises for Shoulder Pain (Eccentric). 2014. Available: https://clinicaltrials.gov/ct2/show/NCT02092272 [Accessed July 2020].
Clinical trial that never published	NCT03025412 (Helbostad J). A Comparison of Endoscopic Surgery and Exercise Therapy in Patients With Longstanding Achilles Tendinopathy. 2017. Available: https://clinicaltrials.gov/ct2/show/NCT03025412 [Accessed July 2020].
Unable to locate study	Tascioglu F, Dalkiran I, Oner C. The efficacy of low-level laser in the treatment of subacromial impingement syndrome due to partial rupture of the supraspinatus tendon. <i>Turkiye Fiziksel Tip ve Rehabilitasyon Dergisi</i> 2003;49: 18-22. [Accessed July 2020].

Unable to locate study	Pekyavas NO, Ergun N. Effects of different exercise and kinesiotaping application on pain, flexibility, strength and range of motion in patients with subacromial impingement syndrome. 2014. [Accessed July 2020].
Unable to locate study	Bicilioglu C, El O, Kizil, R, Pehlivan K. Lateral epikondilitli hastalarda splint ve fizik tedavi veya splint tedavilerinin etkinliginin karsilastirilmesi (Comparison of the therapeutic approaches of the patients with lateral epicondylitis: splint versus splint and physical therapy). Romatoloji ve Tibbi Rehabilitasyon Dergisi Journal of Rheumatology and Medical Rehabilitation 2009;20:4 120-125. [Accessed July 2020].
Unable to locate study	Ozmen A, Ataoglu S. Comparing of the efficacy and effectiveness of isokinetic exercise, laser, pseudoiontophoresis and iontophoresis treatments according to the stage in treatments of subacromial impingement syndrome. 2015. doi:10.5336/medsci.2015-45220. [Accessed July 2020].
Unable to locate study	Lee, SJ. The long-term effects of eccentric exercise vs. extracorporeal shockwave therapy in athletes aged 18-50 with patellar tendinopathy: A meta-analysis and systematic review. Dissertation Abstracts International: Section B: The Sciences and Engineering 2018;78. [Accessed July 2020].
Unable to locate study	Gant R. Rehabilitation in the nonoperative treatment of grade 1 and 2 tibialis posterior tendon dysfunction. Journal of Orthopaedic & Sports Physical Therapy 2009;39. [Accessed July 2020].
Unable to locate study	Karayatiz S, Bal S, Bayram KB. The efficacy of the exercise therapy in patients diagnosed with lateral epicondylitis. 2011. [Accessed July 2020].

Unable to locate study	Citaker S, Taskiran H, Ekici G. Omuz impingement sendromlu hastalarda PNF ve mobilizasyon tekniklerinin rom uzerine etkisi (The effects of PNF and mobilization techniques on the ROM degrees in patients with shoulder impingement syndrome). Fizyoterapi Rehabilitasyon 2001;12: 136. [Accessed July 2020].
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Wrong population	<p>Gialanella B, Comini L, Gaiani M, et al. Conservative treatment of rotator cuff tear in older patients: a role for the cycloergometer? A randomized study. <i>Eur J Phys Rehabil Med</i> 2018;54: 900-910. doi:http://dx.doi.org/10.23736/S1973-9087.18.05038-4. [Accessed July 2020].</p>
Wrong population	<p>Bortoli A, Fujii E, Queiroz M, et al. Conservative treatment of femoroacetabular impingement [Objectives: Introduction: Femoroacetabular impingement (FAI) has recently been proposed as a cause of abnormal stress contact in the hip joint and as a major cause of hip pain in athletes from different sports. The main objectives of preoperative physiotherapy (PT) are pain relief, muscle strength gain and improved function. Objective: To assess the role of physiotherapy in FAI patients Methods: We prospectively evaluated 63 patients undergoing rehabilitation program for FAI aged 19-45 years, without other hip pathologies. The exclusion criteria were associated hip injuries and osteoarthritis, previous surgeries, any neurological pathology that could interfere in the rehabilitation program. The outcome was based on the Harris Hip Score Modified and it was performed at the start and in the end of the rehabilitation program week. All patients underwent the same rehabilitation program for an average of 9.6 weeks. The program was based on exercises to improve the internal and external rotation of hip, cycle ergometer exercise for two hours a day, strength training and return to sports. Time to return to sports was also evaluated. Results: Of the 63 patients submitted to rehabilitation program. There was no significant difference in sports participation, gender and age between groups. The sport most often cited by participants was running (30%). No significant differences related to the affected side and dominance ($p=0.543$) were found. All subjects returned to their sports activities after 12 weeks of treatment. There was a significant improvement in the Harris Hip Score Modified survey points in all subjects assessed ($p < 0.001$). Conclusions: Discussion: FAI is an intra-articular problem. However the cause of the pain is due to factors such as tendinopathy of the extra joint tendons around the hip joint. Restoring the hip muscle balance and core training lead to improved function of the hip joint despite the intra-articular problem. All patients returned to their sport. Physiotherapy can improve hip pain and function in FAI patients.]. 2013. doi:http://dx.doi.org/10.1016/j.arthro.2013.09.061. [Accessed July 2020].</p>

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Wrong population	Jackson G, Sinclair VF, McLaughlin C, et al. Outcomes of functional weight-bearing rehabilitation of Achilles tendon ruptures. Orthopedics 2013;36. doi:10.3928/01477447-20130724-23. [Accessed July 2020].
Wrong population	Cox J, Varatharajan S, Cote P, et al. Effectiveness of acupuncture therapies to manage musculoskeletal disorders of the extremities: a systematic review [with consumer summary]. J Orthop Sports Phys Ther 2016;46: 409-429. doi:10.2519/jospt.2016.6270. [Accessed July 2020].

Wrong population	Heerspink FOL, van Raay JJAM, Koorevaar RCT, et al. Comparing surgical repair with conservative treatment for degenerative rotator cuff tears: a randomized controlled trial. <i>J Shoulder Elbow Surg</i> 2015;24: 1274-1281. doi:10.1016/j.jse.2015.05.040. [Accessed July 2020].
Wrong population	Möller M, Lind K, Movin T, et al. Calf muscle function after Achilles tendon rupture. A prospective, randomised study comparing surgical and non-surgical treatment. <i>Scand J Med Sci Sports</i> 2002;12: 42614. doi:10.1034/j.1600-0838.2002.120103.x. [Accessed July 2020].
Wrong population	Maher SF, Gioannini A, Kowalski S, et al. Isolated exercises versus standard treatment for the shoulder in an industrial setting. <i>Orthop Phys Ther Pract</i> 2011;23: 154-60. [Accessed July 2020].
Wrong population	Nilsson-Helander K, Grävare Silbernagel K, Thomeé R, et al. Acute Achilles Tendon Rupture: A Randomized, Controlled Study Comparing Surgical and Nonsurgical Treatments Using Validated Outcome Measures. <i>Am J Sports Med</i> 2010;38: 2186-2193. doi:10.1177/0363546510376052. [Accessed July 2020].
Wrong population	Pudja D, Forko A, Gregov C. Eccentric exercise in treatment of tendinopathy [Tendinopathy is relatively common pathology both in recreational population and elite athletes. In general, eccentric exercise is considered most effective method of treatment. In order to determine whether training protocols dealing with eccentric exercise aimed at treatment of tendinopathy are indeed effective, literature review was conducted which determined that eccentric exercise do represent the best training choice in its rehabilitation.]. <i>7TH INTERNATIONAL SCIENTIFIC CONFERENCE ON KINESIOLOGY</i> 2014;620. [Accessed July 2020].
Wrong population	Lantto I, Heikkinen J, Flinkkila T, et al. A Prospective Randomized Trial Comparing Surgical and Nonsurgical Treatments of Acute Achilles Tendon Ruptures. <i>Am J Sports Med</i> 2016;44: 2406-2414. doi:10.1177/0363546516651060. [Accessed July 2020].

Wrong population	Barfod KW, Bencke J, Lauridsen HB, et al. Nonoperative Dynamic Treatment of Acute Achilles Tendon Rupture: The Influence of Early Weight-Bearing on Clinical Outcome. <i>J Bone Joint Surg Am</i> 2014;96: 1497-1503. doi:10.2106/JBJS.M.01273. [Accessed July 2020].
Wrong population	Nilsson-Helander K, Silbernagel KG, Thomeé R, et al. Acute Achilles Tendon Rupture: a Randomised, Controlled Study Comparing Surgical and Non-Surgical Treatments using Validated Outcome Measures. <i>SportEX Medicine</i> 2011;38: 2186-2193. doi:10.1177/0363546510376052. [Accessed July 2020].
Wrong population	Centeno C, Fausel Z, Stemper I, et al. A Randomized Controlled Trial of the Treatment of Rotator Cuff Tears with Bone Marrow Concentrate and Platelet Products Compared to Exercise Therapy: A Midterm Analysis. <i>Stem Cells Int</i> 2020;2020. doi:http://dx.doi.org/10.1155/2020/5962354. [Accessed July 2020].
Wrong population	Enblom A, Wicher M, Nordell T. Health-related quality of life and musculoskeletal function in patients with musculoskeletal disorders: after compared to before short-term group-based aqua-exercises. <i>Eur J Physiother</i> 2016;18: 218-225. doi:10.1080/21679169.2016.1181208. [Accessed July 2020].
Wrong population	Wright AA, Hegedus EJ, Tarara DT, et al. Exercise prescription for overhead athletes with shoulder pathology: a systematic review with best evidence synthesis. <i>Br J Sports Med</i> 2018;52: 231-237. doi:10.1136/bjsports-2016-096915. [Accessed July 2020].
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Wrong population	Carlton L, Maccio JR, Maccio JG, et al. The application of Mechanical Diagnosis and Therapy to the ankle-foot complex: a case series. <i>J Man Manip Ther</i> 2018;26: 181-188. doi:http://dx.doi.org/10.1080/10669817.2018.1456028. [Accessed July 2020].

Wrong population	Heikkinen J, Lantto I, Flinkkila T, et al. Soleus Atrophy Is Common After the Nonsurgical Treatment of Acute Achilles Tendon Ruptures: A Randomized Clinical Trial Comparing Surgical and Nonsurgical Functional Treatments. <i>Am J Sports Med</i> 2017;45: 1395-1404. doi:10.1177/0363546517694610. [Accessed July 2020].
Wrong population	Willits K, Amendola A, Bryant D, et al. Operative versus nonoperative treatment of acute Achilles tendon ruptures: a multicenter randomized trial using accelerated functional rehabilitation. <i>J Bone Jt Surg</i> 2010;92: 2767-2775. doi:10.2106/JBJS.I.01401. [Accessed July 2020].
Wrong population	ISRCTN30604244. Physiotherapy in management of mechanical shoulder pain. 2016. doi:https://doi.org/10.1186/ISRCTN30604244. Available: https://www.isrctn.com/ISRCTN30604244?q=30604244&filters=&sort=&offset=1&totalResults=1&page=1&pageSize=10&searchType=basic-search [Accessed July 2020].
Wrong population	Longo UG, Risi Ambrogioni L, Berton A, et al. Physical therapy and precision rehabilitation in shoulder rotator cuff disease. <i>Int Orthop</i> 2020. doi:10.1007/s00264-020-04511-2. [Accessed July 2020].
Wrong population	Ayhan C, Unal E, Yakut Y. Core stabilisation reduces compensatory movement patterns in patients with injury to the arm: a randomized controlled trial. <i>Clin Rehabil</i> 2014;28: 36-47. doi:10.1177/0269215513492443. [Accessed July 2020].
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Wrong population	Soroceanu A, Sidhwa F, Aarabi S, et al. Surgical versus nonsurgical treatment of acute Achilles tendon rupture: a meta-analysis of randomized trials. <i>J Bone Jt Surg</i> 2012;94: 2136-2143. doi:10.2106/JBJS.K.00917. [Accessed July 2020].
Wrong population	Mehta D, MacDermid J, Sadi J. Feasibility of an at home, online, yoga-based and standard exercise intervention for rotator cuff injuries. <i>MOJ Yoga Physical Ther</i> 2017;2: 8-14. doi:10.15406/mojypt.2017.02.00010. [Accessed July 2020].

Wrong population	Guzman J, Haldeman S, Carroll LJ, et al. Clinical practice implications of The Bone and Joint Decade 2000-2010 Task Force on Neck Pain and Its Associated Disorders: from concepts and findings to recommendations. Reprinted from Guzman J et al. Clinical practice implications of The Bone and Joint Decade 2000-2010 Task Force on Neck Pain and Its Associated Disorders: from concepts and findings to recommendations. Spine 2008;33:S199-S213. J Manipulative Physiol Ther 2009;32: 227. [Accessed July 2020].
Wrong population	Angermann P, Hovgaard D. Chronic Achilles tendinopathy in athletic individuals: results of nonsurgical treatment. Foot Ankle Int 1999;20: 304-306. doi:10.1177/107110079902000507. [Accessed July 2020].
Wrong population	King EA, Lien JR, et al. Flexor Tendon Pulley Injuries in Rock Climbers. Hand Clin 2017;33: 141-148. doi:http://dx.doi.org/10.1016/j.hcl.2016.08.006. [Accessed July 2020].
Wrong population	Atya AM, Mansour WT. Laser versus nerve and tendon gliding exercise in treating carpal tunnel syndrome. Life Sci 2011;8: 413-420. [Accessed July 2020].
Wrong population	Almeida MO, Silva BNG, Andriolo RB, et al. Conservative interventions for treating exercise-related musculotendinous, ligamentous and osseous groin pain. Cochrane Database Syst Rev 2013. doi:10.1002/14651858.CD009565.pub2. [Accessed July 2020].
Wrong population	Twaddle BC, Poon P. Early Motion for Achilles Tendon Ruptures: Is Surgery Important? A Randomized, Prospective Study. Am J Sports Med 2007;35: 2033-8. doi:10.1177/0363546507307503. Epub 2007 Sep 20. [Accessed July 2020].
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Wrong population	Bell RH, Wiley WB, Noble JS, et al. Repair of distal biceps brachii tendon ruptures. <i>J Shoulder Elb Surg</i> 2000;9: 223-226. [Accessed July 2020].
Wrong population	Brantingham JW, Globe G, Pollard H, et al. Manipulative therapy for lower extremity conditions: expansion of literature review. <i>J Manipulative Physiol Ther</i> 2009;32: 53-71. doi:10.1016/j.jmpt.2008.09.013. [Accessed July 2020].
Wrong population	Cooper DE, Conway JE. Distal semitendinosus ruptures in elite-level athletes: low success rates of nonoperative treatment. <i>Am J Sports Med</i> 2010;38: 1174-1178. doi:10.1177/0363546509361016. [Accessed July 2020].
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Wrong population	Olsson N, Silbernagel KG, Eriksson BI, et al. Stable surgical repair with accelerated rehabilitation versus nonsurgical treatment for acute Achilles tendon ruptures: a randomized controlled study. <i>Am J Sports Med</i> 2013;41: 2867-2876. [Accessed July 2020].
Wrong population	Silveira Gomes AR, Campos TF, Beckenkamp PR, et al. Effects of Isokinetic Eccentric Training on the Human Achilles Tendon. <i>J Exerc Physiol</i> 2016;19: 46-54. [Accessed July 2020].
Wrong population	Neiduski RL, Powell RK. Flexor tendon rehabilitation in the 21st century: A systematic review. <i>J Hand Ther</i> 2018;32: 165-174. doi:10.1016/j.jht.2018.06.001. [Accessed July 2020].

Wrong population	<p>Dharm-Datta S, et al. The effects of low-intensity blood flow restricted exercise on the clinical outcomes of young active adults following a 3-week in-patient rehabilitation programme. 2017. doi:https://doi.org/10.1186/ISRCTN63585315. Available: https://www.isrctn.com/ISRCTN63585315?q=63585315&filters=&sort=&offset=1&totalResults=1&page=1&pageSize=10&searchType=basic-search [Accessed July 2020].</p>
Wrong population	<p>Serpa DC, Cappozzo A, Camomilla V, et al. Effect of eccentric training on biomechanical properties of the Achilles tendon [Background: This demonstrated the effectiveness of eccentric exercise in the rehabilitation of Achilles tendinitis, on pain and function, but not known, the biomechanical changes that occur in the tendon, which can explain this evidence.</p> <p>Methods: A group of 17 healthy men, with 43.76 ± 8.03 years performed eccentric exercise training of plantiflexors with one leg and concentric exercise training with the other leg, working at a submaximal load, average volume and moderate speed during eight weeks, 5 times a week. Outcome measures included plantiflexors moment of force, elongation (stereophotogrammetry and ultrasound measures) and stiffness of Achilles tendon.</p> <p>Results: we found that stiffness of Achilles tendon decreased significantly from 29.8 N/mm (± 11.8) to 25.7 N/mm (± 9.7) ($P < 0.007$) in the leg working eccentrically and increased from 22.1 N/mm (± 9.6) to 24.6 N/mm (± 9) ($P < 0.004$) in the leg working concentrically.</p> <p>Discussion: Our results showed that eight weeks of eccentric training with submaximal loads, decreased Achilles tendon stiffness in healthy individuals, by contrast, concentric exercise training was related to an increased Achilles tendon stiffness. Effect of eccentric training on tendon stiffness, has been previously studied by Mahieu et al. (2008) and Morrissey et al. (2010), who despite using a similar methodology, found different results. Mahieu et al. (2008) conducted a randomized, controlled, pre-test–post-test to assess effects of eccentric training for 6 weeks (74 volunteers), and found significant change in stiffness after this training, but also found increasing range of motion in ankle dorsiflexion and decreased passive resistance.</p> <p>Possible explanations to Mahieu et al. (2008) results could be that there was tendon adaptation to eccentric exercise with sub-maximum load; tendons become more elastic in response to repeated elongation in downward movement of the heel, until reaching its maximum dorsiflexion range. Morrissey et al. (2010) conducted a randomized, pre-test–post-test, to assess effects of eccentric and concentric training during 6 weeks (38 volunteers), they found decreased tendon stiffness in the eccentric group, but there were not significant changes in the concentric group. We conclude that these changes are probably related to tendon structural</p>

	<p>plasticity in response to the repetition of eccentric movement in the complete range of planti-dorsiflexion.]. J Sci Med Sport 2015;19: E96-E97.doi:http://dx.doi.org/10.1016/j.jsams.2015.12.364. Available: [Accessed July 2020].</p>
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Wrong population	<p>Abate M, Schiavone C, Salini V. Usefulness of rehabilitation in patients with rotator cuff calcific tendinopathy after ultrasound-guided percutaneous treatment. Med Princ Pract 2015;24: 23-29. doi:10.1159/000366422. [Accessed July 2020].</p>
Wrong population	<p>Pekyavas NO, Ergun N. Comparison of virtual reality exergaming and home exercise programs in patients with subacromial impingement syndrome and scapular dyskinesis: Short term effect. Acta Orthop Traumatol Turc 2017;51: 238-242. doi:10.1016/j.aott.2017.03.008. [Accessed July 2020].</p>

Wrong population	Akbaş E, Atay AO, Yüksel I. The effects of additional kinesio taping over exercise in the treatment of patellofemoral pain syndrome. <i>Acta Orthop Traumatol Turc</i> 2011;45: 335-341. doi:10.3944/AOTT.2011.2403. [Accessed July 2020].
Wrong population	Agnello L, Cataldo P, Letizia GA. Rehabilitation following injury of the rotator cuff. <i>Acta Med Mediterr</i> 2003;19: 43-47. [Accessed July 2020].
Wrong population	Ahmad J, Repka M, Raikin SM. Treatment of myotendinous Achilles ruptures. <i>Foot Ankle Int</i> 2013;34: 1074-8. doi:0.1177/1071100713483115. [Accessed July 2020].
Wrong population	Flik KR, Bush-Joseph C, Bach BR. Complete rupture of large tendons: risk factors, signs, and definitive treatment. <i>Phys Sportsmed</i> 2005;33: 19-28. doi:10.3810/psm.2005.08.166. [Accessed July 2020].
Wrong population	Chiodo CP, Wilson MG. Current Concepts Review: Acute Ruptures of the Achilles Tendon. <i>Foot Ankle Int</i> 2006;27: 305-313. doi:10.1177/107110070602700415. [Accessed July 2020].
Wrong population	Huisstede BMA, Koes BW, Gebremariam L, et al. Current evidence for effectiveness of interventions to treat rotator cuff tears. <i>Man Ther</i> 2011;16: 217-230. doi:10.1016/j.math.2010.10.012. [Accessed July 2020].
Wrong population	Cox J, Varatharajan S, Côté P, et al. Effectiveness of Acupuncture Therapies to Manage Musculoskeletal Disorders of the Extremities: A Systematic Review. <i>J Orthop Sports Phys Ther</i> 2016;46: 409-429. doi:10.2519/jospt.2016.6270. [Accessed July 2020].
Wrong population	FernandezCuadros ME, CasiqueBocanegra LO, AlbaladejoFlorin MJ, et al. Bilateral Levofloxacin-Induced Achilles Tendon Rupture: An Uncommon Case Report and Review of the Literature. <i>Clin Med Insights Arthritis Musculoskelet Disord</i> 2019;12. doi:http://dx.doi.org/10.1177/1179544119835222. [Accessed July 2020].
Wrong population	Hsu D, Chang KV. Biceps Tendon Rupture of the Lower Limb. <i>StatPearls</i> 2020. [Accessed July 2020].
Wrong population	Seo JB, Yoon SH, Lee JY, et al. What Is the Most Effective Eccentric Stretching Position in Lateral Elbow Tendinopathy?. <i>Clin Orthop Surg</i> 2018;10: 47-54. doi:10.4055/cios.2018.10.1.47. [Accessed July 2020].
Wrong population	Krischak G, Friemert B, Reichel H, et al. Comparison of physiotherapy and home-based exercises in the conservative treatment of rotator cuff tears. <i>J Shoulder Elbow Surg</i> 2013;22: 1173-1179. doi:10.1016/j.jse.2013.01.008. [Accessed July 2020].

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Wrong population	Fournier-Farley C, Lamontagne M, Gendron P, et al. Determinants of return to play after the nonoperative management of hamstring injuries in athletes: A systematic review. Am J Sports Med 2016;44: 2166-72. doi:10.1177/0363546515617472. [Accessed July 2020].
Wrong population	Cools AM, Borms D, Cottens S, et al. Rehabilitation Exercises for Athletes With Biceps Disorders and SLAP Lesions: A Continuum of Exercises With Increasing Loads on the Biceps. Am J Sports Med 2014;42: 1315-1322. doi:10.1177/0363546514526692. [Accessed July 2020].
Wrong population	Moosmayer S, Lund G, Seljom US, et al. Tendon Repair Compared with Physiotherapy in the Treatment of Rotator Cuff Tears. J Bone Joint Surg Am 2014;96: 1504-1514. doi:10.2106/JBJS.M.01393. [Accessed July 2020].
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Wrong population	Aufwerber S, Heijne A, Edman G, et al. Does Early Functional Mobilization Affect Long-Term Outcomes After an Achilles Tendon Rupture? A Randomized Clinical Trial. Orthop J Sports Med 2020;8. doi:http://dx.doi.org/10.1177/2325967120906522. [Accessed July 2020].
Wrong population	Holm C, Kjaer M, Eliasson P. Achilles tendon rupture -- treatment and complications: A systematic review. Scand J Med Sci Sports 2015;25: e1-e10. doi:10.1111/sms.12209. [Accessed July 2020].
Wrong population	Ferrer GA, Miller RM, Zlotnicki JP, et al. Exercise therapy for treatment of supraspinatus tears does not alter glenohumeral kinematics during internal/external rotation with the arm at the side. Knee Surg Sports Traumatol Arthrosc 2018;26: 267-274. doi:http://dx.doi.org/10.1007/s00167-017-4695-3. [Accessed July 2020].
Wrong population	Smith MM, Franettovich C, Sonia S, et al. A comparison of rigid tape and exercise, elastic tape and exercise and exercise alone on pain and lower limb function in individuals with exercise related leg pain: a randomised controlled trial. BMC Musculoskelet Disord 2014;15: 328. doi:10.1186/1471-2474-15-328. [Accessed July 2020].

Wrong population	Harris JD, Griesser MJ, Best TM, et al. Treatment of proximal hamstring ruptures - A systematic review. <i>J Sports Med Phys Fitness</i> 2011;32: 490-5. doi:10.1055/s-0031-1273753. [Accessed July 2020].
Wrong population	Ecker TM, Bremer AK, Krause FG, et al. Prospective use of a standardized nonoperative early weightbearing protocol for Achilles tendon rupture: 17 years of experience. <i>Am J Sports Med</i> 2016;44: 1004-10. doi:10.1177/0363546515623501. [Accessed July 2020].
Wrong population	Tefner IK, Kovacs C, Gaal R, et al. The effect of balneotherapy on chronic shoulder pain. A randomized, controlled, single-blind follow-up trial. A pilot study. <i>Clin Rheumatol</i> 2015;34. doi:10.1007/s10067-013-2456-3. [Accessed July 2020].
Wrong population	Albright J, Allman R, Bonfiglio RP, et al. Philadelphia panel evidence-based clinical practice guidelines on selected rehabilitation interventions for shoulder pain. <i>Phys Ther</i> 2001;81: 1719-1730. doi:https://doi.org/10.1093/ptj/81.10.1719. [Accessed July 2020].
Wrong population	Ferreira AL, Dos Santos C, Matias R. A kinematic biofeedback-assisted scapular-focused intervention reduces pain, and improves functioning and scapular dynamic control in patients with shoulder dysfunction. <i>Gait and Posture</i> 2016;49: 277. doi:http://dx.doi.org/10.1016/j.gaitpost.2016.07.331. [Accessed July 2020].
Wrong population	Nandra RS, Matharu GS, Porter KM. Acute Achilles tendon rupture. <i>Trauma</i> 2012;14: 67-81. doi:http://dx.doi.org/10.1177/1460408611415909. [Accessed July 2020].
Wrong population	Giombini A, Dragoni S, Di Cesare A, et al. Asymptomatic Achilles, patellar, and quadriceps tendinopathy: A longitudinal clinical and ultrasonographic study in elite fencers. <i>Scand J Med Sci Sports</i> 2013;23: 311-316. doi:10.1111/j.1600-0838.2011.01400.x. [Accessed July 2020].
Wrong population	Cruz MF, Jordan SS, Bolgla LA. Achilles tendon rupture. <i>J Orthop Sports Phys Ther</i> 2013;43. doi:10.2519/jospt.2013.0403. [Accessed July 2020].
Wrong population	Parthasarathy P, Loshigian M, et al. Achilles Tendon Ruptures: Is Surgical Repair More Effective Than Conservative Care?. <i>Podiatry Today</i> 2020;33: 1. [Accessed July 2020].
Wrong population	Fahlstroem M, Bjoernstig U, Lorentzon R. Acute Achilles tendon rupture in badminton players. <i>Am J Sports Med</i> 1998;26: 467-470. doi:10.1177/03635465980260032201. [Accessed July 2020].

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Wrong population	Barabas A, Lloyd N. Orthotic device and exercise regime for flexor pollicis longus tendon repair in cases with possible Linburg-Comstock anomaly. Hand Ther 2013;18: 64-66. doi:10.1177/1758998313495636. [Accessed July 2020].
Wrong population	Fredericson M, Wolf C. Iliotibial band syndrome in runners: innovations in treatment. Sports Med 2005;35: 451-459. doi:10.2165/00007256-200535050-00006. [Accessed July 2020].
Wrong population	Bal S, Oz B, Gurgan A, et al. Anatomic and Functional Improvements Achieved by Rehabilitation in Zone II and Zone V Flexor Tendon Injuries. Am J Phys Med Rehabil 2011;90: 17-24. doi:10.1097/PHM.0b013e3181fc7a46. [Accessed July 2020].
Wrong population	Badalamente MA, Wang ED, et al. CORR® ORS Richard A. Brand Award: Clinical Trials of a New Treatment Method for Adhesive Capsulitis. Clin Orthop Relat Res 2016;474: 2327-2336. doi:10.1007/s11999-016-4862-8. [Accessed July 2020].
Wrong population	al-Qattan M. Conservative management of zone II partial flexor tendon lacerations greater than half the width of the tendon. J Hand Surg 2000;25: 1118-1121. doi:10.1053/jhsu.2000.18486. [Accessed July 2020].
Wrong population	Balci TO, Turk AC, Sahin F, et al. Efficacy of therapeutic ultrasound in treatment of adhesive capsulitis: A prospective double blind placebo-controlled randomized trial. J Back Musculoskelet Rehabil 2018;31: 955-961. doi:10.3233/BMR-150482. [Accessed July 2020].
Wrong population	Barber FA, Sutker MJ. The iliotibial band syndrome: Diagnosis and surgical management. Techniques in Knee Surgery 2008;7: 102-106. doi:http://dx.doi.org/10.1097/BTK.0b013e318160e9ad. [Accessed July 2020].
Wrong population	Başkaya MA, Erçalık C, Karataş Kir Ö, et al. The efficacy of mirror therapy in patients with adhesive capsulitis: A randomized, prospective, controlled study. J Back Musculoskelet Rehabil 2018;31: 1177-1182. doi:10.3233/BMR-171050. [Accessed July 2020].

Wrong population	Ah Lee S, Kang JY, Duck Kim Y, et al. Effects of a scapula-oriented shoulder exercise programme on upper limb dysfunction in breast cancer survivors: a randomized controlled pilot trial. Clin Rehabil 2010;24: 600-13. doi:10.1177/0269215510362324. [Accessed July 2020].
Wrong population	Lisinski P, Huber J, Wilkosz P, et al. Supervised versus uncontrolled rehabilitation of patients after rotator cuff repair-clinical and neurophysiological comparative study. Int J Artif Organs 2012;35: 45-54. doi:10.5301/ijao.5000037. [Accessed July 2020].
Wrong population	Abd-Elkader SM, Ahmed GM, Ahmed AR. Carpal tunnel syndrome: influence of a comprehensive exercise program on its prevalence in dentists. Indian J Physiother Occup Ther 2010;4: 44475. doi:10.5144/0256-4947.2019.07.03.1405. [Accessed July 2020].
Wrong rank on HDI index	Nagrle AV, Herd CR, Ganvir S, et al. Cyriax physiotherapy versus phonophoresis with supervised exercise in subjects with lateral epicondylalgia: a randomized clinical trial. J Man Manip Ther 2009;17: 171-178. doi:10.1179/jmt.2009.17.3.171. [Accessed July 2020].
Wrong rank on HDI index	Zhang BM, Zhong LW, Xu SW, et al. Acupuncture for chronic Achilles tendinopathy: a randomized controlled study. Chin J Integr Med 2013;19: 900-904. doi:10.1007/s11655-012-1218-4. [Accessed July 2020].
Wrong rank on HDI index	Babaei-Mobarakeh M, Letafatkar A, Barati AH, et al. Effects of eight-week "gyroscopic device" mediated resistance training exercise on participants with impingement syndrome or tennis elbow. J Bodyw Mov Ther 2018;22: 1013-1021. doi:10.1016/j.jbmt.2017.12.002. [Accessed July 2020].
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Wrong rank on HDI index	Raeissadat SA, Rayegani SM, Hassanabadi H, et al. Is platelet-rich plasma superior to whole blood in the management of chronic tennis elbow: one year randomized clinical trial. BMC Sports Sci Med Rehabil 2014;6. doi:10.1186/2052-1847-6-12. [Accessed July 2020].
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Wrong rank on HDI index	Morgan S, Janse Van Vuuren EC, Coetzee FF. Patellar Tendinopathy: an International E-Delphi Perspective. S Afr J Res Sport Ph 2018;40: 115-128. [Accessed July 2020].
Wrong rank on HDI index	Silva RMV, Souza Costa L, Silva Coldibel E, et al. Effects of Microelectrólisis Percutaneous® on pain and functionality in patients with calcaneal tendinopathy. Manual Therapy, Posturology & Rehabilitation Journal 2014;12: 185-190. doi:10.17784/mtprehabjournal.2014.12.188. [Accessed July 2020].

<p>Wrong rank on HDI index</p>	<p>Haxhiu B, Murtezani A, Gara E., et al. The efficacy of heavy load exercise for the treatment of chronic achilles tendinosis: a randomized controlled trial [Introduction: The Achilles tendon is the strongest and largest tendon in the body. It is extremely vulnerable to injury due to its limited blood supply and the numerous forces to which it is subjected. The objective of this study is to compare the effectiveness of treatment with eccentric loading with physiotherapeutic interventions (ultrasound and physical therapy) for the treatment of chronic Achilles tendinosis.</p> <p>Materials and Methods: This is a randomized controlled trial which is performed at the Physical Medicine and Rehabilitation Clinic in University Clinical Center of Kosovo. Twenty-four patients with Achilles tendinosis are included in the trial. The subjects were randomly assigned to either the intervention group (n=13) who were treated with eccentric loading exercise and the control group (n=11) who received ultrasound and physical therapy. Outcomes were assessed at baseline and postintervention. The primary outcome was pain as assessed by Visual Analogue Scale and the secondary outcome was calf muscle strength assessed by dynamometer. All subjects were evaluated before treatment and at the 12th week.</p> <p>Results: Twenty-four of 33 subject randomized (72.7%) completed the study. There were no significant differences between the two groups with regard to any variable at baseline ($p>0.05$). In the exercise group, significant improvements were demonstrated for VAS, and muscle strength compared to the control group. The exercise group reported a significantly greater increase in all variables at 12 weeks than did the control group ($p<0.01$).</p> <p>Conclusion: Our results suggest that heavy load eccentric exercise is beneficial in the treatment of Achilles tendinosis. Future studies are needed to evaluate the effectiveness of similar exercise programs over longer periods of time.]. ? 2016;16: 55.doi:10.1111/papr.12451. Available: [Accessed July 2020].</p>
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Wrong rank on HDI index	<p>Gara E, Haxhiu B, Ibrahimaj A, et al. The effectiveness of exercise therapy for treatment of medial epicondylitis: A randomized controlled trial [Objectives: Medial epicondylitis (ME) is a condition that occurs when the tendons on the inside of the forearm become irritated, inflamed, and painful due to repetitive use of the hand, wrist, and forearm. Most patients respond to conservative measures with exercise therapy and counterforce bracing. Physical modalities are effective for short-term pain control but have not demonstrated long-term benefit. The objective of the present study is to evaluate if exercise therapy in addition to mobilization techniques is more effective in improving elbow pain and function compared with ultrasound and massage in patients with ME. Methods: We performed a randomized controlled trial of 12 weeks' duration in patients with chronic medial epicondylitis. Participants aged at least 18 years with a clinical diagnosis of ME, characterized by medial elbow pain were included. We randomly assigned 43 subjects to an exercise group (n = 22), who received exercise therapy and mobilization techniques, and a control group (n = 21), who were treated with ultrasound and massage. To evaluate the subjects, two instruments were used: pain intensity, measured with a Visual Analogue Scale (VAS), and functional disability, measured with the Patient-Rated Elbow Evaluation (PREE). Results: There were no significant differences between the two groups in the baseline anthropometric data ($p > 0.05$). After the exercise program, pain and elbow function ($p < 0.01$) improved significantly with exercise compared to ultrasound. Conclusion: Overall, the findings indicated that ultrasound and massage intervention are effective at short-term follow-up, and exercise are effective at intermediate- and long-term follow-up. Our results suggest that exercise therapy is beneficial in the treatment of ME.]. ? 2016. doi:http://dx.doi.org/10.1111/papr.12451. [Accessed July 2020].</p>
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Wrong rank on HDI index	<p>Nuruzzaman KM, Mozaffar AS, Rahman KM, et al. Effect of stretching and strengthening exercise in the management of Lateral Epicondylitis. 2017. doi:http://dx.doi.org/10.1111/1756-185X.13178. [Accessed July 2020].</p>
Wrong rank on HDI index	<p>Khairy Y, Nasr M, Ali F, et al. Role of platelet rich plasma in treatment of rotator cuff tendinopathy and partial thickness tear: follow Up by ultrasound. <i>Ann Rheum Dis</i> 2019;78:1. doi:10.1136/annrheumdis-2019-eular.4218. [Accessed July 2020].</p>

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Wrong rank on HDI index	Camargo PR, Haik MN, Ludewig PM, et al. Effects of strengthening and stretching exercises applied during working hours on pain and physical impairment in workers with subacromial impingement syndrome. Physiother Theory Pract 2009;25: 463-475. doi:10.3109/09593980802662145. [Accessed July 2020].
Wrong rank on HDI index	Camargo PR, Albuquerque-Sendín F, Avila MA, et al. Effects of Stretching and Strengthening Exercises, With and Without Manual Therapy, on Scapular Kinematics, Function, and Pain in Individuals With Shoulder Impingement: A Randomized Controlled Trial. J Orthop Sports Phys Ther 2015;45: 984-997. doi:10.2519/jospt.2015.5939. [Accessed July 2020].
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Wrong study design	Author unknown, et al. Help for your hands. <i>Harvard women's health watch</i> 2016;23: 4-5. [Accessed July 2020].
Wrong study design	Baar K. Stress Relaxation and Targeted Nutrition to Treat Patellar Tendinopathy. <i>International Journal of Sport Nutrition and Exercise</i>

	Metabolism 2019;29: 453–457. doi:10.1123/ijsnem.2018-0231. [Accessed July 2020].
Wrong study design	Fournier M. Pediatric Lower Extremity Sports Injuries. Podiatry Management 2013;32: 91-98. [Accessed July 2020].
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Wrong study design	<p>Rio E, Kidgell D, Cook J. 88 Exercise Reduces Pain Immediately And Affects Cortical Inhibition In Patellar Tendinopathy [Introduction Patellar tendinopathy (PT) affects the ability to jump and land due to pain and associated corticospinal changes to motor patterning.</p> <p>Whilst eccentric exercise is commonly used in rehabilitation, it can be painful to complete.¹ Tendinopathy is especially problematic in competitive season, during which there are constant time and performance pressures.² Where eccentric exercise has been completed in the competitive season, there has been poor adherence due to pain and either no benefit [Visnes, 2005] or worse outcomes [Fredberg, 2008]. There is a need for interventions that reduce pain immediately, enabling participation in sport yet do not negatively impact on muscle fatigue, which may affect performance. The purpose of this study was to compare an acute bout of either isometric or isotonic muscle contractions on patellar tendon pain and function and maximal voluntary isometric leg extension torque.</p> <p>Methods This was a single blinded, randomised cross over study compared the effect of a bout of isometric and isotonic muscle contractions on patellar tendon pain, quadriceps strength and measures of corticospinal excitability and inhibition. Outcome measures were single leg decline squat pain (SLDS) for tendon pain, transcranial magnetic stimulation for corticospinal excitability and inhibition and maximal voluntary isometric contraction (MVIC) torque for quadriceps strength. Data were analysed using a split-plot in time repeated measures ANOVA.</p> <p>Results Six volleyball players with PT participated (mean SLDS pain was 7.5/10 (range 7–8), mean cortical inhibition ratio was 27.53% ± 13.0). Isometric muscle contractions significantly reduced SLDS pain immediately (mean 0.16/10 range 0–1; $p < 0.0001$; 95% CI: -5.887– -1.280) (Figure 1) and reduced cortical inhibition to 54.95% ± 8.25 compared to isotonic contractions, (95% CI: 12.13–33.92; $p = 0.0020$) regardless of the order of intervention and resulted in sustained pain relief for at least 45 min post intervention. MVIC was increased following the isometric muscle contraction intervention by 18.7% but decreased following the isotonic protocol.</p> <p>Discussion Compared to isotonic contractions, a single strength training bout of isometric contractions reduced patellar tendon pain immediately and for at least 45 min post intervention and increased MVIC. The reduction</p>

	<p>in pain was paralleled by a reduction cortical inhibition, providing insight into potential mechanisms. The clinical implications are that isometric muscle contractions may be used to reduce pain without associated muscle fatigue in PT.]. Br J Sports Med 2014;48:2 A57-A58. [Accessed July 2020].</p>
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Wrong study design	<p>Wong J, Barrass V, Maffulli N. Quantitative review of operative and nonoperative management of Achilles tendon ruptures. / Etude quantitative de la litterature sur le traitement par mode operatoire ou non operatoire des déchirures du tendon d ' Achille. Am J Sports Med 2002;30: 565-575. doi:10.1177/03635465020300041701. [Accessed July 2020].</p>
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Wrong study design

Kirwan P, French H. 50 Recalcitrant Achilles Tendinopathy Treated With Exercise And Glyceryl Trinitrate: A Case Report [Introduction Tendinopathy is a common musculoskeletal condition that is prevalent in both the sporting and sedentary population, and Achilles tendinopathy (AT) has a higher prevalence than any other tendinopathy site (de Jonge, 2011). The annual incidence of Achilles tendinopathy has been estimated at 9% in top level runners (Lysholm, 1987) and elite long distance runners have a lifetime risk of 52% (Kujala, 2005). Clinically, tendinopathy presents with tendon pain with loading, tenderness on palpation and impaired function (Kountoris, 2007). Topical glyceryl trinitrate (GTN) has exhibited a role in tendon healing via increasing nitric oxide, which in turn causes fibroblast proliferation, collagen synthesis, contraction of collagen lattices and local vasodilation (Paoloni, 2004; Murrell, 1997). The majority of research in the area of GTN and AT has been conducted by one group (Paoloni, 2004) but there is conflict in the literature, as the results have not been replicated (Kane, 2008).

Methods A 32-year old male triathlete presented with a seven year history of Achilles tendinopathy which had failed conservative treatment. Tendinopathic changes were confirmed on MRI. The patient reported intermittent Achilles pain related to running and was unable to train or participate in running components of triathlons due to the Achilles pain. Swimming and cycling were pain-free. The patient had declined injection therapies and surgery. Local pain and stiffness were particularly noticed in the morning. Any attempts at running caused alteration of running technique, reduction in performance times and pain for three days thereafter.

Initial presentation (Day 1) Initial examination revealed tenderness and palpable thickening in the mid-portion of the right Achilles. The following outcome measures were administered: Victoria Institute of Sports Assessment (VISA-A), Lower Extremity Functional Scale (LEFS) and Numerical Rating Scale (NRS) (Table 1). Repeat assessments were conducted at days 30, 60, 90 and 180.

Treatment The option of using topical GTN patches as an adjunct to the exercise regime was discussed and the possible side effects were highlighted. The patient consented to this treatment. The GTN patch was prescribed by a consultant rheumatologist, and administered as outlined by Paoloni et al (2004), one quarter patch delivering 1.25 mg/day placed on the affected tendon and replaced daily, for 6 months. The patient also commenced a phased Achilles tendon loading programme (Silbernagel, 2007).

Results The patient had made a complete recovery and was asymptomatic by day 180 (see table 1) and the affected Achilles was no longer tender on palpation. The patient had returned to running and triathlete training, running 7 km at a pace of 3 min 41 seconds per kilometre.

	<p>Discussion The evidence to date suggests that GTN has a potential role in the treatment of tendinopathy as an adjunct to exercise. This case highlights the benefit of topical GTN as an adjunct to a specific exercise programme and as a treatment consideration for a triathlete with recalcitrant Achilles tendinopathy. Further trials would be useful in validating the role of GTN as a potential modality in the treatment of tendinopathy.]. Br J Sports Med 2014;48:2 A32-A33. [Accessed July 2020].</p>
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Supplementary File 7: Citation Analysis

Exercise therapy for the treatment of tendinopathies: A scoping review

Main information on citation data

##	Description	Results
## 2	Timespan 1998:2021	
## 3	Sources (Journals, Books, etc)	164
## 4	Documents	450
## 5	Average years from publication	8.65
## 6	Average citations per documents	46.62
## 7	Average citations per year per doc	4.106
## 8	References	14860
## 9	DOCUMENT TYPES	
## 10	article	377
## 11	conference paper	1
## 12	note	1
## 13	review	71
## 14	DOCUMENT CONTENTS	
## 15	Keywords Plus (ID)	1574
## 16	Author's Keywords (DE)	584
## 17	AUTHORS	
## 18	Authors	1613
## 19	Author Appearances	2180
## 20	Authors of single-authored documents	5
## 21	Authors of multi-authored documents	1608
## 22	AUTHORS COLLABORATION	
## 23	Single-authored documents	5
## 24	Documents per Author	0.279
## 25	Authors per Document	3.58
## 26	Co-Authors per Documents	4.84
## 27	Collaboration Index	3.61
## 28		

Most productive authors in collection

##	Authors	Articles	Authors	Articles Fractionalized
## 1	ROY JS	12	ALFREDSON H	3.23
## 2	ALFREDSON H	11	MAFFULLI N	2.53
## 3	DE VOS RJ	11	ROY JS	2.27
## 4	MAFFULLI N	10	STASINOPOULOS D	2.25
## 5	MALLIARAS P	10	LITTLEWOOD C	2.14
## 6	VERHAAR JAN	10	VICENZINO B	2.09
## 7	VICENZINO B	10	LORENTZON R	2.08
## 8	WEIR A	10	MALLIARAS P	2.06
## 9	LITTLEWOOD C	9	DE VOS RJ	1.96
## 10	TOL JL	9	LANGBERG H	1.88
## 11	ZWERVER J	9	BALTACI G	1.83
## 12	COOK J	8	JONSSON P	1.78
## 13	DESMEULES F	8	STASINOPOULOS I	1.75
## 14	FRMONT P	8	VERHAAR JAN	1.71
## 15	LANGBERG H	8	WEIR A	1.69
## 16	CLELAND JA	7	CLELAND JA	1.65
## 17	LORENTZON R	7	TOL JL	1.53

## 18	MORRISSEY D	7 ZWERVER J	1.51
## 19	BALTACI G	6 WHEELER PC	1.50
## 20	BISSET L	6 COOK J	1.44

* Articles fractionalized represents a summation of the number of articles divided by the number of coauthors Most common sources in collection

##	Sources	Articles
## 1	BRITISH JOURNAL OF SPORTS MEDICINE	39
## 2	AMERICAN JOURNAL OF SPORTS MEDICINE	28
## 3	JOURNAL OF ORTHOPAEDIC AND SPORTS PHYSICAL THERAPY	15
## 4	CLINICAL JOURNAL OF SPORT MEDICINE	14
## 5	KNEE SURGERY SPORTS TRAUMATOLOGY ARTHROSCOPY	14
## 6	CLINICAL REHABILITATION	11
## 7	SCANDINAVIAN JOURNAL OF MEDICINE AND SCIENCE IN SPORTS	11
## 8	JOURNAL OF HAND THERAPY	8
## 9	MANUAL THERAPY	8
## 10	PHYSICAL THERAPY IN SPORT	8
## 11	PHYSIOTHERAPY (UNITED KINGDOM)	8
## 12	FOOT AND ANKLE INTERNATIONAL	7
## 13	JOURNAL OF SPORT REHABILITATION	7
## 14	PHYSICAL THERAPY	7
## 15	ARCHIVES OF PHYSICAL MEDICINE AND REHABILITATION	6
## 16	BMJ OPEN SPORT AND EXERCISE MEDICINE	6
## 17	EUROPEAN JOURNAL OF PHYSICAL AND REHABILITATION MEDICINE	6
## 18	JOURNAL OF BACK AND MUSCULOSKELETAL REHABILITATION	6
## 19	JOURNAL OF MANIPULATIVE AND PHYSIOLOGICAL THERAPEUTICS	6
## 20	MUSCLES LIGAMENTS AND TENDONS JOURNAL	6

Most cited articles in collection

##	Paper	
DOI TC TCperYear		
## 1	ALFREDSON H, 1998, AM J SPORTS MED	10.1177/036
35465980260030301	726 30.25	
## 2	DE VOS RJ, 2010, J AM MED ASSOC	10.1001/jam
a.2009.1986	582 48.50	
## 3	SMIDT N, 2002, LANCET	10.1016/S01
40-6736(02)07811-X	493 24.65	
## 4	MAFI N, 2001, KNEE SURG SPORTS TRAUMATOL ARTHROSCOPY	10.1007/s00
1670000148	309 14.71	
## 5	HBORG L, 2004, BR J SPORTS MED	10.1136/bjs
m.2001.000284	301 16.72	
## 6	BISSET L, 2006, BR MED J	10.1136/bmj
.38961.584653.AE	297 18.56	
## 7	BANG MD, 2000, J ORTHOP SPORTS PHYS THER	10.2519/jos
pt.2000.30.3.126	289 13.14	
## 8	FAHLSTRM M, 2003, KNEE SURG SPORTS TRAUMATOL ARTHROSCOPY	10.1007/s00
167-003-0418-z	249 13.11	
## 9	ROMPE JD, 2007, AM J SPORTS MED	10.1177/036
3546506295940	240 16.00	
## 10	DE JONGE S, 2011, AM J SPORTS MED	10.1177/036

3546511404877	236	21.45	
## 11 KUHN JE, 2009, J SHOULDER ELBOW SURG			10.1016/j.j
se.2008.06.004	228	17.54	
## 12 BISSET L, 2005, BR J SPORTS MED			10.1136/bjs
m.2004.016170	226	13.29	
## 13 THANASAS C, 2011, AM J SPORTS MED			10.1177/036
3546511417113	225	20.45	
## 14 MICHENER LA, 2004, J HAND THER			10.1197/j.j
ht.2004.02.004	224	12.44	
## 15 KONGSGAARD M, 2009, SCAND J MED SCI SPORTS			10.1111/j.1
600-0838.2009.00949.x	210	16.15	
## 16 SILBERNAGEL KG, 2001, SCAND J MED SCI SPORTS			10.1034/j.1
600-0838.2001.110402.x	210	10.00	
## 17 MCCLURE PW, 2004, PHYS THER			10.1093/ptj
/84.9.832	191	10.61	
## 18 BROX JI, 1999, J SHOULDER ELBOW SURG			10.1016/S10
58-2746(99)90001-0	190	8.26	
## 19 MALLIARAS P, 2013, SPORTS MED			10.1007/s40
279-013-0019-z	186	20.67	
## 20 ROOS EM, 2004, SCAND J MED SCI SPORTS			10.1111/j.1
600-0838.2004.378.x	183	10.17	

Top 50 author keywords (with counts of use)

##	TENDINOPATHY	REHABILITATION	
EXERCISE			
##	83	47	
41			
##	PHYSICAL THERAPY	SHOULDER	SH
SHOULDER IMPINGEMENT SYNDROME			
##	32	32	
31			
##	PAIN	SHOULDER PAIN	
TENNIS ELBOW			
##	30	27	
26			
##	ACHILLES TENDON	PHYSIOTHERAPY	
ROTATOR CUFF			
##	24	24	
24			
##	SUBACROMIAL IMPINGEMENT SYNDROME	ECCENTRIC TRAINING	
EXERCISE THERAPY			
##	22	21	
19			
##	LATERAL EPICONDYLITIS	ACHILLES	
ECCENTRIC EXERCISE			
##	18	17	
17			
##	MANUAL THERAPY	ULTRASOUND	
SYSTEMATIC REVIEW			
##	16	16	
15			

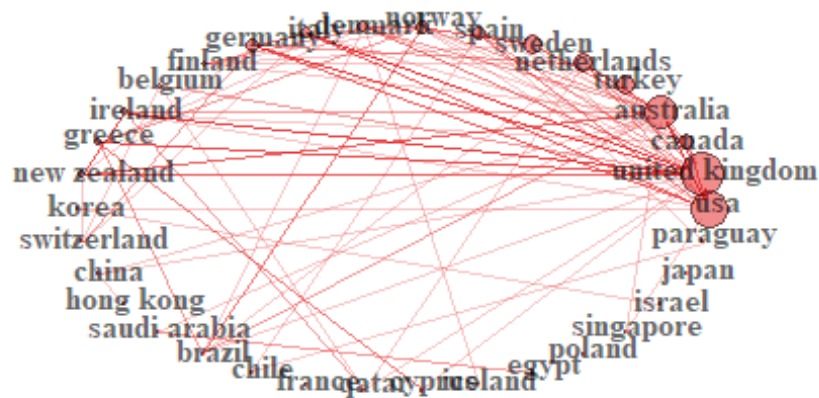
##	PLATELET-RICH PLASMA	TENDON
ECCENTRIC		
##	14	14
13		
##	ACHILLES TENDINOPATHY	RANDOMIZED CONTROLLED TRIAL
TREATMENT		
##	12	12
12		
##	PATELLAR TENDINOPATHY	IMPINGEMENT
TENDINOSIS		
##	11	10
10		
##	CONSERVATIVE TREATMENT	PATELLAR TENDON
ULTRASONOGRAPHY		
##	9	9
9		
##	INJECTION	ECCENTRIC EXERCISES
JUMPER'S KNEE		
##	8	7
7		
##	ROTATOR CUFF TENDINOPATHY	TENDINITIS
FUNCTION		
##	7	7
6		
##	CRYOTHERAPY	DRY NEEDLING
KNEE		
##	5	5
5		
##	MOTOR CONTROL	PATELLAR
PHYSICAL THERAPY MODALITIES		
##	5	5
5		
##	QUALITY OF LIFE	SHOULDER IMPINGEMENT
SUBACROMIAL PAIN SYNDROME		
##	5	5
5		
##	TRAINING	BIOMECHANICS
##	5	4

Most productive countries in collection

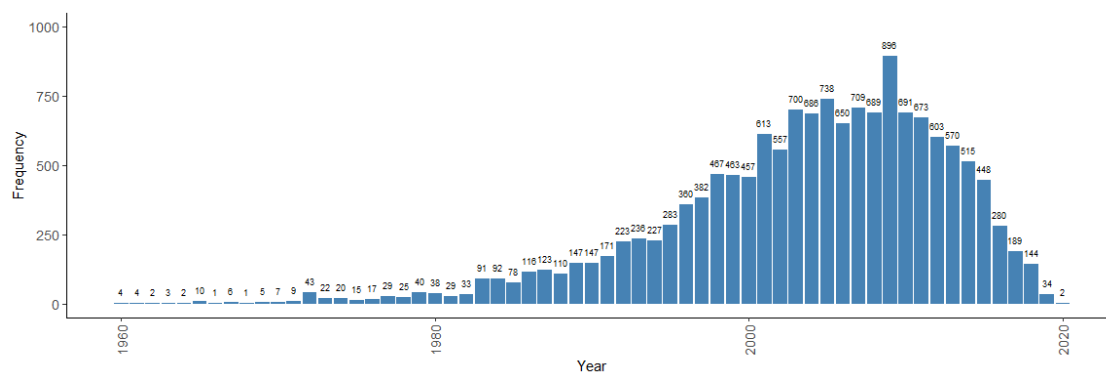
##	Country	Articles	Freq	SCP	MCP	MCP_Ratio
## 1	UNITED KINGDOM	53	0.12990	37	16	0.3019
## 2	USA	47	0.11520	38	9	0.1915
## 3	TURKEY	44	0.10784	43	1	0.0227
## 4	AUSTRALIA	40	0.09804	28	12	0.3000
## 5	SWEDEN	28	0.06863	27	1	0.0357
## 6	CANADA	27	0.06618	23	4	0.1481
## 7	NETHERLANDS	27	0.06618	22	5	0.1852
## 8	SPAIN	20	0.04902	15	5	0.2500
## 9	NORWAY	19	0.04657	11	8	0.4211
## 10	DENMARK	16	0.03922	11	5	0.3125

##	11	GERMANY	14	0.03431	8	6	0.4286
##	12	ITALY	11	0.02696	8	3	0.2727
##	13	BELGIUM	9	0.02206	7	2	0.2222
##	14	GREECE	8	0.01961	4	4	0.5000
##	15	KOREA	7	0.01716	6	1	0.1429
##	16	IRELAND	6	0.01471	0	6	1.0000
##	17	NEW ZEALAND	6	0.01471	4	2	0.3333
##	18	FINLAND	5	0.01225	4	1	0.2000
##	19	SAUDI ARABIA	4	0.00980	2	2	0.5000
##	20	CHINA	3	0.00735	2	1	0.3333

Country collaboration network diagram



Reference distribution over time



Reference distribution over sources (top 50)

##		
##	AM J SPORTS MED	BR J SPORTS MED
J ORTHOP SPORTS PHYS THER		
##	655	628
304		
##	BMJ	J SHOULDER ELBOW SURG
SCAND J MED SCI SPORTS		
##	262	249
248		
##	PHYS THER KNEE SURG SPORTS TRAUMATOL ARTHROSC	
J BONE JOINT SURG AM		
##	220	214
205		
##		ARCH PHYS MED REHABIL
PAIN		
##	194	156
145		
##	MAN THER	SPORTS MED
BRITISH JOURNAL OF SPORTS MEDICINE		
##	143	134
126		
##	CLIN J SPORT MED	J HAND THER
FOOT ANKLE INT		
##	126	123
117		
##	PHYSIOTHERAPY	CLIN ORTHOP RELAT RES
ANN RHEUM DIS		
##	116	107
104		
##	BMC MUSCULOSKELET DISORD	COCHRANE DATABASE SYST REV
J BONE JOINT SURG BR		
##	104	104
97		
##	CLIN ORTHOP	MED SCI SPORTS EXERC
J ORTHOP RES		
##	94	94
85		
##	LANCET	CLIN SPORTS MED
J BONE JOINT SURG		
##	85	82
75		
##	ARTHROSCOPY	BR J SPORTS MED.
JAMA		
##	70	70
70		
##	CLIN REHABIL	AM J SPORTS MED.
SPINE		
##	68	67
67		
##	RHEUMATOLOGY	J CLIN EPIDEMIOL
PHYSICAL THERAPY		
##	64	63

62		
##	DISABIL REHABIL	ARTHRITIS RHEUM
	ORTHOP CLIN NORTH AM	
##	59	57
57		
##	AMERICAN JOURNAL OF SPORTS MEDICINE	SCAND J RHEUMATOL
	J SCI MED SPORT	
##	56	56
54		
##	MANUAL THERAPY	INT ORTHOP
	J MANIPULATIVE PHYSIOL THER	
##	54	52
51		
##	J RHEUMATOL	INT J SPORTS PHYS THER
##	51	50