



Fatih Büyükcamlar <fatihbuyukcam@gmail.com>

Thank you for submitting your review of Manuscript ID WJEM-2016-0024 for the World Journal of Emergency Medicine

onbehalf+f+163.com@manuscriptcentral.com <onbehalf+f+163.com@manuscriptcentral.com>

11 Mart 2016 01:21

Yanıt Adresi: nancysjf@163.com

Alınan: fatihbuyukcam@gmail.com

11-Mar-2016

Dear Dr. Buyukcam:

Thank you for reviewing manuscript # WJEM-2016-0024 entitled "Comparisons of inter-rater reliability and predictive validity of FOUR score and Glasgow Coma Scale in multi-traumatic patients" for the World Journal of Emergency Medicine.

On behalf of the Editors of the World Journal of Emergency Medicine, we appreciate the voluntary contribution that each reviewer gives to the Journal. We thank you for your participation in the online review process and hope that we may call upon you again to review future manuscripts.

Sincerely,

Prof. Shao Jufang

Associate Editor, World Journal of Emergency Medicine

nancysjf@163.com

World Journal of Emergency Medicine

Completed Review

Below is a copy of the review you submitted.

Manuscript Details

Reviewer Affiliation: Diskapi Yildirim Beyazit Egitim , Department of Emergency Medicine

Manuscript ID: WJEM-2016-0024

Manuscript Type: Original Article

Keywords: Inter-rater reliability✳, Prediction✳, Glasgow Coma Scale✳, FOUR score✳, Trauma✳

Speciality: Emergency Medicine✳, Trauma✳

Date Submitted: *blinded*

Manuscript Title: Comparisons of inter-rater reliability and predictive validity of FOUR score and Glasgow Coma Scale in multi-traumatic patients

Date Assigned: 04-Mar-2016

Date Review Returned: 11-Mar-2016

Questionnaire	Excellent	Good	Average	Poor
req Originality			✓	
req Clinical or scientific content			✓	
req Study design			✓	
req Statistical analysis				✓
req Clarity of presentation				✓

req Conclusions drawn



req Recommendation

Accept

Minor Revision

✓ Major Revision

Reject

Would you be willing to review a revision of this manuscript?

✓ Yes

No

Comments

Confidential Comments to the Editor

The study gives additional data of comparison of two scores in poly-traumatic patients. But the quality of writing of manuscript is poor. After major revision the manuscript may be appropriate for publication.

req Comments to the Author

Abstract

- Line 30 - "the calculated mortality rate was....."
- If the rate means percent please indicate. What is the calculated mortality rate. If 33.1 means percent, please indicate for which GCS scale range. For example: Under GCS value 6 the mortality rate is.....
- The mean values are not so important if the GCS scores are not distributed normally. In standard emergency admissions GCS generally doesn't show a normal distribution so giving the median value of this scores is better. If they are normally distributed, mean values are better.
- Also we can see the sd of the hospital duration is higher than the mean value; it means that distribution is not normal. Giving the median values are better.
- Giving the inter-rater reliability is important but you have to explain that this kappa value indicates the reliability between physicians and nurses. Also there is slight difference between kappa values of both score, one is 0.84 and the other is 0.86. Over 0.8 kappa value means a good reliability. Both tests are good but the difference between them is 0.02. Did you calculate that this difference is statistically significant. Unless you didn't do this calculation you can not say one is better than the other exactly.

Material and Method

- I told before that you have to indicate clearly the inter-rates reliability mean between nurse and physicians.
- GCS=<5 and FOUR=<6 are cut off points. How did you calculate this please indicate. I can advise you to use ROC analyse to calculate the cut off points for in hospital mortality.
- Line 20 - delete "emergency transferring device"

Results

- The first sentence that gives the study size is appropriate for material and method part. Please move it to material and method.
- Delete " and 22 (22.9%) were female". You gave the male number which is higher, we know that the rest of them are female.
- The second paragraph gives a table data. Showing this percentages with number of patients, mortality rates, mean hospital durations, mean GCS and FOUR scores and mean or median shock indexes will be a better presentation.
- Transferring device is not important for your study. Please remember your title while writing the results. Giving the whole data is not so good. You are giving the reliability of GCS and FOUR score. Giving the trauma types is important for understanding the study population which I mentioned above but the transferring device is a very different topic.
- Line 57 - "the mortality rate was 9.3% for....."
- In material and method part you told that you included the poly-trauma patients. Write as "the mortality rate was 9.3%, 2 (2.0%) of the patients died in the emergency department, others after hospitalization."
- Line 6-31... The two paragraphs are far from the main topic.
- Line 35 - Is p value of Spearman's correlation is 0.0001 or <0.001. Generally SPSS program give 0.000 as the best p value. It could be better to write as follows: "There was a high positive correlation between FOUR and GCS scores ($r=0.981$, $p<0.001$)."
- Line 39 - What does 'correlated' means. When you say a correlation, you can not give a significant difference in the following sentence. Also if you say a difference of scores between expired and non-expired patients you have to give the median or mean values of GCS and FOUR in expired and non-expired ones.
- Line 46 - Give subgroup analyze results.
- I couldn't understand what the authors tried to tell in this paragraph.

Discussion

Discussion part should be revised after revision of result part. Unnecessary data have to be removed such as shock index etc.

Files attached

- [scan.pdf](#) [PDF](#)
✓ This file is for the Editor only

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World Journal of Emergency Medicine

Manuscript No.: WJEM-2016-0024

FIRST REVIEW

Title: Comparisons of inter-rater reliability and predictive validity of FOUR score and Glasgow Coma Scale in multi-traumatic patients

Referee's Name: Fatih Büyükcamlar

Referee's No.:

Date sent: 2016-3-4

Date due back: 2016-4-4

CONFIDENTIAL REPORT to the Editor (please tick)

	Excellent	Good	Average	Poor
Originality	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Clinical or scientific content	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Study design	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Statistical analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Clarity of presentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Conclusions drawn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

RECOMMENDATIONS to the Editor (please tick)

- Acceptability:
- ☐ Accept
 - ☐ Accept after revision
 - ☒ Reassess after revision (return to referee)
 - ☐ Reject

Priority*: ☐ 1 (High) ☐ 2 ☒ 3 ☐ 4 (Low)

* Priority rating is crucial to the Editor. In the event of conflicting referee recommendations, manuscripts with high priorities may be subject to additional review while those with low priorities may be rejected.

CONFIDENTIAL COMMENTS to the Editor (not to be transmitted to the authors)

The study gives additional data of comparison of two scores in poly-traumatic patients. But the quality of writing of manuscript is poor. After major revision the manuscript may be appropriate for publication.

Date: 10.03.2016.

Signature: 

(Note to referees: Please do not put your name or signature on this form. If you need more space, attach additional sheets)

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Referee's No.:

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