*IJME* Manuscript evaluation guidelines:

Title: **Walking Blood Banks: An Innovative and Immediate Solution to the Blood Drought in Rural India**

Importance of the paper  
  
Does it address issues relevant to the fields of medical ethics and bioethics in India and the developing countries? Yes.

Is it topical?  
  
           Is the issue discussed from another country's/culture perspective? Yes in LMIC  
  
           Will it influence practice or policy? Yes  
  
           Is it too specialized for the journal? No  
  
  
Originality  
  
           Is the information /comment new? The author’s own reference in BMJ paper (reference 1) has obvious similarities. However, there are sufficient differences between the two papers because this paper is specific to rural India and addresses the specific issue of insufficient blood availability.

Conclusions  
           Is the interpretation warranted, unwarranted, well developed? Yes  
  
           Does the article contain loose generalizations? No  
  
           Are there any important omissions? No  
  
  
Other comments:

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Recommendation  
  
Accept with modifications (specify)  
  
- substance – see below  
  
  
**Separate comments for the author:**

Sood et.al., have proposed a solution to deficiency of blood in rural India by offering Unbanked directed blood transfusion ( UDBT). The article can be of potential interest to this journal. But a few issues need to be addressed:

1. Line 2 of the introduction refers to “rural” India and not India. . The authors should refer specifically to the fact that they have covered this ground before. Thus, it would be appropriate in line 2, “We have stated before that “**rural”** India is dependent on --------- blood banking system (Jenny 2017).
2. Authors have proposed the use of whole blood at a time when whole blood has been replaced by components. Although for obvious reasons component separation cannot be practiced in rural India, there must at least be a mention of components. Perhaps the next stage would be for the Government to set up proper blood banks with component facility in every district. Until then however, the author’s recommendation of UDBT is appropriate.
3. The authors may want to state that even in urban India, blood banks have prescreened pools of donors with rare blood groups. Since this is acceptable and legal, it should be perfectly legal and acceptable for the same model in rural India for all blood groups.
4. In the second paragraph under “The safety of walking blood banks”, I suggest the statement “ Put another way………60 years “ be deleted, because the earlier line “Is the theoretical risk -- ----------------------everyday?” makes the point clear. The next two statements are not quite appropriate as they consider only one particular hospital, while the reality is that if the authors’ proposal were made legal, ALL rural hospitals would have access to UDBT. Given that all statistics in this and other papers are universal, it does not make sense to extrapolate to a single hospital to emphasize this.

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Note: Please maintain confidentiality regarding the submissions you review.

Please let us know whether you would like your name to be published along with the article or

would prefer it not be disclosed - No