Dear editor,

Thank you for your valuable comments which helped in refining the manuscript. Please find the response to your queries below. Accordingly, I have also made few changes in the methods, discussion, conclusion sections which I have made as ‘tracked changes’.

Hope the responses are satisfactory.

1. Provide rationale for a comparative analysis across the three colleges. This is necessary as the study is titled multi-centric. Usually multi-centric studies are used to increase heterogeneity in the sample and enhance the potential variability and include a sample that covers the range of possibilities. That these three colleges represent such a range of possibilities has not been established. For this reason, writing of a rationale for these three institutions will offer an explanation.

While the authors do not claim that this is representative of the population of first year students of Karnataka state, the sampling strategy needs to be explained from this perspective for the feasibility and relevance to become policy guidance. Otherwise it is a futile exercise in paper publishing with no policy relevance.

**Response:**

Thank you for your valuable comments.

1. Sampling strategy for heterogeneity, potential variability and potential wide range of possibilities:

Following the pilot study conducted by college A (7), invitation to participate in a multi-centric study was extended to various colleges from all over the state in the workshop that followed (22). The scale up study was conducted with the two colleges that responded favourably. The three colleges were from two different universities. One was private Catholic-minority institution under the State Medical University with formal separate ethics classes for undergraduate students conducted by the Medical Ethics department functional since several years, another college was a private institution from the same State Medical University which was naïve for the student exposure to ethics sessions and the third was a private medical college under a different deemed university again naïve to ethics course. The methodological limitation of non-inclusion of a government medical college despite the investigators’ effort needs to be mentioned due to constraints and challenges of implementation. The admission process for the present academic year were similar across the three colleges through National Eligibility Entrance Test (NEET) which was the common Medical entrance test throughout the state. Thus, the students fairly represent the medical students across the state. *(Added in the Methodology)*

1. Further, the results present the demographics of the students (Table 2) with heterogeneous group of students who were involved in the study with varied state of birth, mother tongue and domiciles from across the country. *(already mentioned in the results)*

In this context, we would like to change the title of the study to:

“**Integrating ethics into the Physiology curriculum: a scale-up study across Medical colleges in Karnataka, South India”**

2. Explain how these leading questions would contribute to an assessment of relevance and feasibility of the programme.

Response: Thank you for your valuable comments.

The Semi-structured feedback questionnaire used in the scale-up study was developed by the authors of the pilot study one of whom was a Medical teacher (Physiology), second was a person with experience in qualitative research, social sciences and ethics; third who was the head of division of Health and Humanities and Professor of Physiology. The questionnaire was, pretested and applied in the pilot study (7).

The questionnaire was developed with an intent to capture the perceptions of students in terms of relevance, feasibility benefits, merits and demerits of continuing the program in future and suggestions for improvement of integrating ethics course in Physiology by means of both open-ended and close-ended questions.

*(added the above details into methodology)*

Relevance: The issue of ‘Relevance’ was assessed through perception of students about ‘**relevance of the program during I MBBS course’** and **‘relevance in future years of the course’.**

Feasibility: The issue of feasibility was assessed through perception of students about **‘effective integration of the program’** and **‘interference in Physiology teaching’.**

Thank you. Kindly accept and do the needful.