

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

Title (Provisional)

ICU follow-up services and their impact on post-intensive care syndrome: a scoping review protocol

Authors

Zhang, Rui-xue; Xu, Yu; Tian, Yongming; He, Lin; chu, yuan

VERSION 1 - REVIEW

Reviewer	1
Name	Ashcroft, Rachelle
Affiliation	University of Toronto
Date	24-Jun-2024
COI	None

Thank you for the opportunity to review this scoping review protocol. A few items to consider revising to strengthen the manuscript are as follows:

-Abstract: Methods and analysis states that “Quantitative and thematic analyses will be used to evaluate and classify the findings”. Consider an alternate word for ‘evaluate’ since a scoping review does not evaluate quality (unlike systematic reviews) and it may cause confusion.

-Background: Include a definition of the concept of ICU and add some background information about ICUs (i.e. typical length of stay, reasons for admission to ICU, etc.). The protocol talks about extending services to ICU but does not provide any information about what currently exists in ICU.

-Background: term multidisciplinary is used when it seems more like interdisciplinary

-Eligibility criteria section: Write out a sentence introducing the inclusion and exclusion criteria.

-General editing: Overall it is a well written manuscript although several typos and grammatical errors remain. Another round of edits to catch remaining items is recommended.

Reviewer	2
Name	Zuo, wenwen
Affiliation	Lishui Central Hospital and Fifth Affiliated Hospital of Wenzhou Medical College, Operating room
Date	15-Sep-2024
COI	No conflict of interest

The article retrieval process is not clear, the discussion part is missing, and the theoretical framework applied is not reflected in the article.

Reviewer	3
Name	Sharshar, Tarek
Affiliation	University of Paris, Neuroanimation
Date	20-Sep-2024
COI	I have no competing interests

I read with great interest the manuscript by Zhang et al. Their scoping review is timely because it will address a major issue for ICU physicians and also because recent trials on this issue have been published.

Major concerns

I found the methodology appropriate.

I think the authors should either limit their search to studies published in international journals or extend their search beyond Chinese or English-language medical journals.

Addressing the effectiveness of post-ICU follow-up organization involves collecting data on the community health system, which varies greatly from post-industrialized to emerging countries. The authors should list the data specific to this question.

I have no minor comments

VERSION 1 - AUTHOR RESPONSE

To reviewer 1

Dear Dr. Rachelle Ashcroft,

I hope this message finds you well. Thank you very much for taking the time to review our manuscript. We greatly appreciate the effort and expertise you have contributed to the peer-review process. We have carefully considered each comment and suggestion and have made the following key changes to the manuscript (Revisions to the text were made using Microsoft Word Track Changes. References were revised by highlighting the added references in yellow.):

1. Abstract: In the Methods and analysis section, the methods of analysis and results presentation were rewritten to avoid the use of 'evaluate' or related words.
2. Background: In the background section, the definition of ICU has been added and some relevant background information has been added, as well as the services that currently exist during patients' ICU stay.
3. Background: ICU follow-up clinic requires a multidisciplinary team, generally including clinicians, nurses, rehabilitation therapists, psychological counselors, etc.
4. Eligibility criteria section: A sentence has been added explaining the principles for setting the inclusion and exclusion criteria.
5. General editing: The full text was reviewed and edited. Typos and grammatical errors were corrected.

I hope my revision and explanation can reply your comments.
Warm regards.

Ruixue zhang (on behalf of our research team)

To reviewer 2

Dear Mr. Zuo,

I hope this message finds you well. Thank you very much for taking the time to review our manuscript. We have diligently worked on addressing each of the comments and suggestions, and we believe that the manuscript has improved as a result. Here are the key changes we have made (Revisions to the text were made using Microsoft Word Track Changes. References were revised by highlighting the added references in yellow.):

1. Retrieval process: The retrieval process was further refined and improved.
2. Discussion part: As this is a scoping review protocol, there is no discussion section. I also checked the recent scoping review protocol published in bmj open,

but none of them had a discussion section. The discussion section will be written in a future completed review manuscript.

3. Theoretical framework: This review will be strictly adhere to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews framework. This is refined in the Strengths and limitations of this study and Methods section.

I hope my revision and explanation can reply your comments.
Warm regards.

Ruixue zhang (on behalf of our research team)

To reviewer 3

Dear Prof. Tarek Sharshar,

I hope this message finds you well. Thank you very much for taking the time to review our manuscript. Your insightful comments and constructive feedback have been invaluable in enhancing the quality and clarity of our work. In response to your feedback, we have made some revisions (Revisions to the text were made using Microsoft Word Track Changes. References were revised by highlighting the added references in yellow.).

1. During the search, we will search internationally published literature (via Cochrane Library, Medline, Web of Science, Embase, EBSCO Academic, CINAHL, PsycINFO and SinoMed) as well as Chinese literature (via SinoMed), restricted to peer-reviewed literature and grey literature at the time of inclusion, and restricted language to English or Chinese. The relevant process has been presented in the Methods section.

2. Regarding data differences in community health systems, we think this is a very valuable and meaningful piece of advice. We added a fourth question to the research question: What is the data management of ICU follow-up service? (such as data on the community health system). In addition, we will further explain the differences in data on community health systems from post-industrialized to emerging countries in the future scoping review.

I hope my revision and explanation can reply your comments.
Warm regards.

Ruixue zhang (on behalf of our research team)