

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	CLINICAL PRACTICE GUIDELINE RECOMMENDATIONS FOR PEDIATRIC INJURY CARE: protocol for A SYSTEMATIC REVIEW
AUTHORS	Moore, Lynne; Freire, Gabrielle; Ben Abdeljelil, Anis; Berube, Melanie; Tardif, Pier-Alexandre; Gnanvi, Eunice; Stelfox, Henry; Beaudin, Marianne; Carsen, Sasha; Stang, Antonia; Beno, Suzanne; Weiss, Matthew; Labrosse, Melanie; Zemek, Roger; Gagnon, Isabelle; Beaulieu, Emilie; Berthelot, Simon; Klassen, Terry; Turgeon, Alexis; Lauzier, François; Pike, Ian; Macpherson, Alison; Gabbe, Belinda; Yanchar, Natalie

VERSION 1 – REVIEW

REVIEWER	Bugaev, N Tufts Medical Center, Surgery
REVIEW RETURNED	24-Jan-2022

GENERAL COMMENTS	Outstanding work.
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REVIEWER	Kiragu, Andrew Hennepin County Medical Center, Pediatrics
REVIEW RETURNED	15-Feb-2022

GENERAL COMMENTS	<p>The authors describe the process by which they will perform a systematic review of the literature on clinical practice guideline recommendations for pediatric injury care. An ambitious project. A couple of questions/concerns</p> <ol style="list-style-type: none">1. The statement that "evidence suggests the presence of deficiencies in the quality of care provided to up to half of all pediatric trauma patients in Canada, the US, and Australia" seems overly broad and the authors cite one source to back this statement.2. The authors will need to also account for the heterogeneity of the pediatric populations in the different countries being studied as well as differences in injury patterns, resource availability, health systems, EMS systems, etc. in these countries. They appear to allude to this in the conclusion.
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REVIEWER	Leichtle, Alexander University of Bern
REVIEW RETURNED	15-Feb-2022

GENERAL COMMENTS	Review of the manuscript "CLINICAL PRACTICE GUIDELINE RECOMMENDATIONS FOR PEDIATRIC INJURY CARE: PROTOCOL FOR A SYSTEMATIC REVIEW" by Moore et al.
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	<p>The authors present a study draft for generating a systematic review of CPG recommendations for pediatric injury care.</p> <p>General comments: The topic is important, the protocol is detailed and seems to be complete</p> <p>Specific comments: 1. The inclusion of only high-income countries might generate some bias. Would there be a possibility of adapting recommendations in a way, that these can be, at least in part, also used in other countries to benefit also these?</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

Dr. N Bugaev, Tufts Medical Center

Comments to the Author:

Outstanding work.

We thank the reviewer for his very positive feedback.

Reviewer: 2

Dr. Andrew Kiragu, Hennepin County Medical Center

Comments to the Author:

The authors describe the process by which they will perform a systematic review of the literature on clinical practice guideline recommendations for pediatric injury care. An ambitious project. A couple of questions/concerns

1. The statement that "evidence suggests the presence of deficiencies in the quality of care provided to up to half of all pediatric trauma patients in Canada, the US, and Australia" seems overly broad and the authors cite one source to back this statement.

We have added precisions to this statement to clarify.

2. The authors will need to also account for the heterogeneity of the pediatric populations in the different countries being studied as well as differences in injury patterns, resource availability, health systems, EMS systems, etc. in these countries. They appear to allude to this in the conclusion. We absolutely agree. First, we have planned to stratify our synthesis by diagnostic group (TBI, SCI, thoraco-abdominal, multisystem). This information has been added to the Methods section. Second, several items of AGREE instruments that we will use to evaluate the quality of CPGs have items pertaining to how contextual elements were considered in the development phase (e.g. facilitators/barriers, resource implications, applicability to target users, applicability to patients or populations, values and preferences of patients/families and target users). Third, while we believe it is extremely important to synthesize recommendations from LMICs, we prefer to do so in a separate review. We have mentioned this as a limit in the Strengths and Limitations bullet points and in the Limitations section at the end of the manuscript.

Reviewer: 3

Dr. Alexander Leichtle, University of Bern

Comments to the Author:

Review of the manuscript "CLINICAL PRACTICE GUIDELINE RECOMMENDATIONS FOR PEDIATRIC INJURY CARE: PROTOCOL FOR A SYSTEMATIC REVIEW" by Moore et al.

The authors present a study draft for generating a systematic review of CPG recommendations for

pediatric injury care.

General comments:

The topic is important, the protocol is detailed and seems to be complete

Specific comments:

1. The inclusion of only high-income countries might generate some bias. Would there be a possibility of adapting recommendations in a way, that these can be, at least in part, also used in other countries to benefit also these?

As mentioned above, while we believe it is extremely important to synthesize recommendations from LMICs, we prefer to do so in a separate review. We have mentioned this as a limit in the Strengths and Limitations bullet points and in the Limitations section at the end of the manuscript.

Reviewer: 1

Competing interests of Reviewer: No competing interests to report

Reviewer: 2

Competing interests of Reviewer: I have no competing interests

Reviewer: 3

Competing interests of Reviewer: none

VERSION 2 – REVIEW

REVIEWER	Kiragu, Andrew Hennepin County Medical Center, Pediatrics
REVIEW RETURNED	08-Mar-2022

GENERAL COMMENTS	The authors have satisfactorily addressed my concerns and recommend this work be accepted for publication.
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REVIEWER	Leichtle, Alexander University of Bern
REVIEW RETURNED	27-Mar-2022

GENERAL COMMENTS	My concern was adequately addressed
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