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Title: DNR status as an independent risk factor for patients undergoing surgery for hip fracture

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Dear Editors,

Thank you for the opportunity to revise this paper and resubmit for consideration of publication. Please see our comments below which respond to the comments by the reviewers. We hope that this will clarify the changes that have been made. We are thankful for the comments of the reviewers and are confident that their input will strengthen the manuscript.

*Reviewer #1: Please add in more detail on why DNR listed patients still undergo hip surgery i.e. what are the risks of not operating. Is the data available able to differentiate between individuals who had cemented hemiarthroplasty or THA versus those with uncemented implants or fixation. cannulated screws are much less invasive than dynamic hip screw fixation which is less invasive than hemi or total arthroplasty and the use of cement is well know to cause cardiopulmonary events in this patient group. Please address these points if possible in the results section and if not comment on this a major drawback of this study.*

- Regarding why DNR listed patients are undergoing surgery: Unfortunately, one of the limitations of using this large dataset is the inability to extract precise information about the surgical decision making that led to surgery being performed on these patients with DNR status. We agree with the reviewer that this is a very important area in which we have limited data. We are hopeful that our group and others will be able to continue this important work. We have made a note of this limitation on lines 446-451.

-Regarding the operative details: again, unfortunately, this dataset did not include specific operative details including those requested by the reviewer (i.e. cemented vs. un-cemented components). We have made note of this limitation on lines 440-445.

Reviewers #2 and #3 – we appreciated the comments of these reviewers and their time spent on the manuscript. As there are no specific comments from these reviewers, we did not make specific changes.

We have used the helpful comments from the editor to make minor revisions throughout, including (1) superscript of the references within the text, (2) addition of PMID to the references section, and (3) addition of addition of the required components for publication. All changes are labeled in ‘track changes’.

Thank you once again for considering this work. We look forward to hearing from you.