

Reviewer #1

It is nicely written. However, it does not add anything to the literature or change the management plan.

We appreciate the complement on our writing and we thank the reviewer for their opinion about our contribution to the literature. It is true that some trauma centers have established mechanisms that are appropriately managing the timeliness of operative treatment of supracondylar humerus fractures however many centers that care for moderate volumes of children with fractures struggle to take care of these patients in a timely manner. The type of report we provide here may help other institutions like ours implement quality improvement projects to enhance the timeliness of care for children with fractures

Reviewer #2

The study is aimed to describe the effect of a program allowing an early operating room (OR) start for uncomplicated trauma prior to an elective day of surgery to decrease wait times for surgery for urgent fractures admitted overnight. The title is "Effectiveness of an Early Operating Room Start Time in Managing Pediatric Trauma".

1. This is a retrospective design.
yes
2. The sample size of the study is relatively small.
correct
3. Several factors influence the outcome of the study. Please discuss these.
Done
4. Please review the literature and add more details in the discussion section.
done
5. Please add more details of the limitations of the study.

We think the reviewer for this point by point explanation of the limitations. We have enhanced the final paragraph of our discussion to provide a more thorough

review of the limitations that one should consider when interpreting the results of her study. We feel that the manuscript is stronger as a result

6. What is the new knowledge of the study?

There are many studies that look at the effect of the timing of surgery on clinical outcomes but there is a gap in the literature in terms of strategies to expedite care. The current study aims to fill that gap.

7. Please recommend to the readers “How to apply this knowledge in clinical practice?”.

Conclusion has been updated

“This information may be useful to surgeons and hospital administrators as they undertake quality improvement programs to enhance the timeliness of care. Future implementations of such programs should involve stakeholders early in the planning process to better address the needs of the OR staff. ”

Reviewer #3

The present study retrospectively included 44 uncomplicated SCHF, 16 received treatment before implementation of the 6 AM Start quality improvement program while 28 treated after, and 6 FSF (5 treated before program and 1 treated after) to compare demographics and timing of treatment of SCHF and FSF treated one year before and after implementation as well as the survey responses from the surgical team, in the result, it demonstrated significantly reduced wait times for surgery for uncomplicated SCHF presenting overnight while discussing the importance of shared decision-making with the stakeholders. In term of this, the manuscript is acceptable, However, several minor revisions are needed.

1. The figure 1 and figure are deformed, needing to be revised.

a. This has been updated.

2. The words in figure 3 are not clear, and the figure 3 is not fully explained in the result .

- a. This has been updated.

3. The data is only from one center, so the number of subjects are limited which affect the significance of the study, and it is better to perform multiple centers research.

This limitation has been acknowledged.