

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Pediatrics

ESPS manuscript NO: 28057

Title: Video recording of neonatal resuscitation: A feasibility study to inform widespread adoption

Reviewer's code: 02446483

Reviewer's country: Canada

Science editor: Fang-Fang Ji

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Video recording of neonatal resuscitation: a feasibility study to inform widespread adoption is a very interesting manuscript. However, I would suggest some changes. The authors used the mixed method to assess the effectiveness of implementation and outcomes, but explanation for this choice is poor. Necessary data were collected using participation rates, surveys, feedback forms, focus group, participant observation and by analyzing the comments on feedback forms and surveys. More details are needed.

Moreover, it seems that there is no differentiation between First Nations / Aborigines and other ethnic groups. This aspect for both neonates and personnel performing the resuscitation needs to be added.

Debriefing points were usually kept to a maximum of three to ensure in-depth discussions, but what about priorities. In which direction, was priority set? Selected parts of a video could be replayed as necessary. This is also very interesting, but how many times for the several ethnic groups (First Nations, etc.). Finally, the debriefing session was summarized to distil the lessons learned for future



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

<http://www.wjgnet.com>

use. A video debriefing session was adjourned, but after 4 pm or 9 pm makes difference, isn't?
The instructor facilitated VD and documented any system issues identified during resuscitation.
Again, the ethnic groups of the facilitators should be added as well as for the probands.
Future perspective and QA application are not deeply discussed and need to be added.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Pediatrics

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Title: Video recording of neonatal resuscitation: A feasibility study to inform widespread adoption

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
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<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

this is an well-written article investigating an interesting issue in the neonatal care. However, I have no practical experience on the use of video recording to improve quality of care in delivery. from the point of methodology I have some suggestions that may improve the manuscript. 1. The study is full of statistical description, but there is lack of statistical inference. To my point of view, statistical inference should be performed to inform readers what your data tell us (Ann Transl Med. 2016 Mar;4(5):91. doi: 10.21037/atm.2016.02.11.). are there enough evidence that your data are not at random. for example, are there any link between clinical outcomes of neonates and video recording? what factors can determine the acceptance of video recording in medical personels? these problem can be addressed using multivariable regression model (Ann Transl Med. 2016 Mar;4(6):111. doi: 10.21037/atm.2016.02.15.).at least, these point should be discussed and acknowledged as a limitation.pls also cite the reference I suggested above if you find they are helpful.