

ESPS Peer-review Report

Name of Journal: World Journal of Critical Care Medicine

ESPS Manuscript NO: 10575

Title: The French pre-hospital trauma triage criteria. Is “pre-hospital resuscitation” criterion of extra value?

Reviewer code: 02459226

Science editor: Fang-Fang Ji

Date sent for review: 2014-04-08 17:53

Date reviewed: 2014-04-14 11:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The authors performed a monocentric prospective cohort study of injured adults to evaluate the performance of the French Vittel criteria to select polytrauma patients during pre hospital stage and evaluate if their pre hospital resuscitation criterion increases positive predictive value of pre-hospital trauma triage. They included 200 patients over a 2 years period. They found the criterion PH resuscitation present for 64 patients but 10 of them with an ISS<16. This was significantly correlated with the severity of the trauma in univariate analysis. The authors concluded that the criterion pre-hospital resuscitation was significantly correlated with the severity of trauma but did not increase the PPV. I believe that the submitted work is of high interest and suitable for publication after some minor revision. Please find my analysis hereby listed: Introduction Precise and well written. Authors present relevant background information. However, please add a study hypothesis at the end. What where you supposed to find in your study? Methods: Please blind where this study was undertaken. Please add if you got approval of your IRB at the beginning of the methods section. Methods are well described. Did you collect data using a predefined data sheet? Please add your significance level used in the section on statistical analysis. Results: Please spell out all abbreviations when first used in the manuscript (ISS, TRISS ect. ...). Please use “.” instead of commas for decimals. Tables add important background information. Discussion: Please start with your study aim, followed by your hypothesis and your major finding. Please add further aspects to the limitations section of your work and spell this out as a written paragraph. E.g. the study might be underpowered, you lack different criteria as the Vittel for further evaluation. The discussion is



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presented with relevant background information. The conclusion are based on the authors findings. General aspects: Language: The authors should have this reevaluated by a native speaker, there are many language errors and typing errors in this manuscript. The references are upt to date, however, there appear also some spelling mistakes. Please reevaluate this. Every figure and table hast o be able to stand on ist own. Please revise accordingly.

ESPS Peer-review Report

Name of Journal: World Journal of Critical Care Medicine

ESPS Manuscript NO: 10575

Title: The French pre-hospital trauma triage criteria. Is "pre-hospital resuscitation" criterion of extra value?

Reviewer code: 00502779

Science editor: Fang-Fang Ji

Date sent for review: 2014-04-08 17:53

Date reviewed: 2014-05-09 21:22

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The work had an aim of evaluating the Prehospital resuscitation as a criterion for triage. The idea of evaluating the value of the prehospital resuscitation seems good but I think the research wasn't conducted in the best way to elaborate this fact. PH resuscitation is not a part of the trauma or accident; it's a modulating factor that might "affect" the outcome. Moreover, as resuscitation is done to the indicated cases (already diagnosed as severe), reconsidering it as an item to evaluate severity is rather repetition (the only related item to it, proven by the authors was the severity). Therefore, I believe that the main aim or objective of the study would be "Did pre-hospital resuscitation improve the outcome of the patients" rather than the present. I therefore recommend either to re-evaluate the aim as mentioned or to compare the results of the french triage system with other systems and compare the outcome of the similar scores to see whether this resuscitation impacted the outcome of the trauma. Other comments are: - The language needs several revisions as some words are still written in French like "Références" and some translations are not appropriate like "à posteriori" which was translated as "a posteriori" rather than "retrospectively". - Only one paragraph was dedicated to the research topic while the rest of the discussion targeted the other criteria of Vittel; which are not the scope of the present work. - The title mentioned "extra-value" but it was limited to the severity of trauma only; the value might be better outcome, less pre-hospital mortality or shorter hospital stay. These items should be evaluated and mentioned or the title should be changed to limit the scope.