

Work-related Musculoskeletal Injuries Among Upper Extremity Surgeons: A Web-based Survey

Dear Reviewers,

Thank you for your additional review of our manuscript. Your comments are constructive and have been applied in the manuscript. Please find below a point-by-point response to your comments. We have modified the manuscript accordingly and hope that we have addressed all your suggestions. We look forward to your feedback.

Kindly note that all line references in the Author Response section and Text change section refer to the revised manuscript line numbering (unless specifically stated).

Reviewer Remark	Author Response	Revised Manuscript Line Number and text change.
REVIEWER 1:		
The statistic method used in each comparison is not very clear, and I don't think one-way anova method is appropriate for this study. Actually, age, years in practice, annual caseload, etc. are independent variables, while the outcome (such as MSK injury or not) is dependent variable, and in this study all the dependent variables could only be divided into 2 groups (with MSK injury or not; with treatment or not; with time-off leave or not), so there is no need for one-way anova method. For continuous variables like 'age' and 'annual caseload', I think student t test is more sensitive to detect difference between two groups (such as 'with MSK injury or not; with treatment or	Thank you for the comment. To clarify the statistical method applied we have revised the methods section. The grouping of age and annual case load was guided by previously published similar studies.	Page 4, line 66: The survey contained questions related to the surgeons demographics (e.g. age, gender, hand-dominance, type of practice, number of years in practice and annual caseload), which were divided into groups guided by previously published similar studies.

not; with time-off leave or not'), there is no need to divide these variables into different age groups or annual caseload groups.		
The tables in the manuscript should be designed to be more scientific, logic and clear.	Thank you for the comment, this has been revised accordingly and tables made more logic and clear.	
There is no reference for the survey used in the study, or could add the modified version as a supplemental material	Thank you for the comment, the survey was found to be significantly long to add as supplemental material but if required it can be added.	
Are all the surgeons in ASES or CSES only do upper extremity practice?	The major practice of member surgeons is upper extremity.	
Because the respondent rate is really low, If possible, authors could compare the democratic characteristics of responders with those of ASES or CSEC members. If similar, could partly reduce the bias.	Thank you for the comment, unfortunately the majority of responders were members of both societies and this comparison would be difficult.	
Science Editor:		
Self-cited references: There are 3 self-cited references. The self-referencing rates should be less than 10%. Please keep the reasonable self-citations (i.e. those that are most closely related to the topic of the manuscript) and remove all other improper self-citations. If the authors fail to address the critical issue of self-citation, the editing process of this manuscript will be terminated.	Thank you for the comment, citation removed and only remained very relevant citations.	
The “Author Contributions” section is missing. Please provide the author	Thank you for the comment, this has been revised accordingly.	Title page: Authors Contributions: MM Alzahrani: Concept, design, study

contributions;		<p>execution, manuscript writing and review.</p> <p>SM Alqahtani: Concept, design, study execution, manuscript writing and review.</p> <p>D Pichora: Concept, design, manuscript writing and review.</p> <p>R Bicknell: Concept, design, manuscript writing and review.</p>
<p>The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor;</p>	<p>Thank you for the comment, this has been revised accordingly.</p>	
<p>PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references.</p>	<p>Thank you for the comment, this has been revised accordingly.</p>	
<p>The “Article Highlights” section is missing. Please add the “Article Highlights” section at the end of the main text</p>	<p>Thank you for the comment, this has been revised accordingly.</p>	<p>Highlights:</p> <ul style="list-style-type: none"> • Work-related musculoskeletal injuries are a common occurrence during the years of practice of upper extremity surgeons.

- The most common diagnoses were low back pain, lateral elbow epicondylitis and neck pain.
- Awareness and knowledge of these injuries can minimize the financial and psychological burden on both surgeons and the healthcare system.

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REVIEWER 1:		
1. Why you chose 'one way anova' statistic method? This was not clearly answered.	Thank you for your comment and we apologize if this wasn't clear initially. To prevent survey taker input issues (which we had with our first published survey of a similar study), the demographic data was categorized in the survey (including e.g. age, years in practice and annual case load). Therefore because the collected data was in this form the one way ANOVA test was applied.	
2. I didn't find the Tables in the revised manuscript.	Thank you for this comment. The tables have been included now.	