Reviewer's report

Title: Comparison of the Glidescope, flexible fibreoptic intubating bronchoscope, iPhone modified bronchoscope, and the Macintosh laryngoscope in normal and difficult airways: A manikin study.

Version: Date: 15 November 2013

Reviewer: Massimiliano Sorbello

Reviewer's report:

Major Compulsory Revisions

Background
(page 4, lines 3-4): please clarify role of fiberoptic intubation as rescue device in failed intubation, with special reference to avoid its use in case of asphyctic emergency.

(page 4, line 6): better to refer performance of videolaryngoscopes to better view of vocal cords and larynx, rather than to epiglottis.

(page 4, line 10): there can be different reasons of videolaryngoscopes failure, not only restricted mouth opening, such as, for example, active bleeding or difficulty to address tube. So it could be better to write “..might fail for different reasons, for example if there is difficulty..”

(page 5, line 3): better specify iPhone producer/manufacturer, exactly as with all other devices mentioned in the text (i.e. Apple Inc, Cupertino, CA, USA..)

Results
(page 9) i would recommend adding some comment on great difference with experience of devices within groups, just to make it clearer different performance reasons. In example, nurses did not have any experience with fiberoptic, and this explains statistical results, while, especially if not clarified, could be bias source for some conclusions.

Discussion
(page 11)
i suggest to provide some temptative explanations for low performance of iphone if compared to conventional fiberoptic+video, maybe citing technical problems elsewhere described and focusing on visual limitation (iphone camera resolution lower of conventional CCD camera devices!) and screen dimensions.

Reason for lower performance within nurses could be also their basic lack of experience with conventional fiberoptic. In fact, adding external screen to substitute direct eyepiece vision, adds further coordination difficulties, and might perform better if a basic fiberoptic skill is already aquired.

Conclusions:
i would recommend to make it clearer, with special reference to suggested
teaching potentialities of modified bronchoscope, clarifying endpoints or results from which this statement is supported.

Minor Essential Revisions
page 9, headlines in bold: “verses” should be “versus”
pag 13, line 13: i would recommend “using” rather than “utilizing”

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

In the past five years i received reimbursements and fees from Verathon Medical Europe, producer of Glidescope mentioned in this paper.