Reviewer's report

Title: Role of an anesthesiology curriculum in improving bag-mask ventilation and intubation success rates of emergency medicine residents: a prospective descriptive study

Version: 3 Date: 11 October 2010

Reviewer: Henry Wang

Reviewer's report:

I recognize that you have invested significant effort in your revision, and you are to be commended for your hard work. I still have many major concerns about your paper. These comments are not meant to be inflammatory, argumentative or overtly "picky." Rather, these comments are meant to help you achieve a work that is print worthy and that bears a meaningful and well articulated message.

You appear to have worked with an editorial service to revise the written English of the work. I remain puzzled and challenged by the poor writing and organization. For example, every sentence in the Introduction is a separate paragraph – this is certainly not conventional style. The writing mechanics and structure continue to challenge me as a reader, as it is often difficult to ascertain your intended underlying meaning. Many of your statements are irrelevant or undeveloped. I feel that your paper needs comprehensive revision (almost a complete re-write) and not simply small editorial corrections.

My most significant objection is that you are trying to make very bold and broad claims based upon a limited series of subjects, a single site, and a weak study design. In addition, the relationship that you propose – that an anesthesia rotation would improve BVM and ETI skill – could be considered common sense, even without formal demonstration. It would be imprudent for EM training internationally to shift practice based solely upon your results.

I strongly recommend a far more downscaled and restrained paper. I presume that EM training in your country is relative new and untested. Your paper should focus on your effort to cultivate airway management skills in this unique environment. You should provide discussion points and lessons unique to Iran and shed light on how these findings might help other countries that have nascent developing EM training programs.

Other major suggestions:

- Again, the methods of general anesthesia as irrelevant to the paper. Your paper is about EM resident skill acquisition.
- I would delete all elapsed time data – the differences observed are not clinically relevant.
- The bar graphs should have 95% CI whiskers.
- Use your discussion to highlights the nuances of training EM residents where emergency medicine is a new and growing specialty. I am more interested in understanding how you developed your program. I am less interested in the general literature on this topic.
- Many of your points are not relevant; for example, “Good anesthesia teams combine enthusiasm, a willingness to teach and an inquiring approach.” Your paper is about EM student and their skill acquisition – not the competence or quality of anesthesia teachers.

**Level of interest:** An article of limited interest

**Quality of written English:** Not suitable for publication unless extensively edited

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

I declare that I have no competing interests