Reviewer's report

Title: Protocol for the prospective randomised trial comparing nasogastric with intravenous hydration in children with bronchiolitis (ACTRN12605000033640)
The comparative rehydration in bronchiolitis study (CRIB)

Version: 2 Date: 16 February 2010
Reviewer: Federico Martinon-Torres

Reviewer’s report:

This protocol deals with an important topic in pediatrics -bronchiolitis- and address a theoretically simple but neglected and interesting question, as it is the preferred route for rehydration. The results of this protocol may have impact for clinical routine management of such a common pediatric disease. However, there are some issues in the actual version of the protocol that need to be addressed.

The abstract and the manuscript lack a discussion section where limitations, “hopes and fears” re the study should be clearly discussed and stated. In the abstract, this section should also be included with the number of trial registration.

The methods are appropriate in general terms, but there are some questions that should be addressed and discussed.
- the exclusion of children < 2mo ? why?
- the upper limit of 12 (instead of 6 or 24 mo, for example)?
- I cannot understand the limit of 100% normal daily requirements...what if tachypneic, febrile, or just already dehydrated when admitted? How are you going to provide (and control) this extra needs then to the child?
- In page 6, the laboratory investigations: after reading it I have understood that this laboratory investigators will exclusively performed in those randomised in the IV fluid management group. If this is a misunderstanding, please rewrite it accordingly. If not, please explain me
- Re the clinical observation and record, why not using an already existing scale such modified wood-downes, or similar?
- There are some repetitions that may be omitted (page 6 first paragr and page 7 2nd parag). Please review the rest of the text.
- The use of any further medication nebulized or systemic should be protocolized or at least controlled!! Are you considering this?

Finally there are some discretionary comments I would like to make:
- I would recommend the authors to consider and plan a subgroup and also comparative analysis considering cohorts according to age distribution. The age itself but also the more consistent diagnosis of bronchiolitis in the infants below
6mo may be of importance for the results, and this hypothesis should not be neglected.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

'I declare that I have no competing interests'