Reviewer's report

Title: Poor adherence to neonatal resuscitation guidelines exposed using camera surveillance at a tertiary hospital in Nepal.

Version: 1 Date: 1 April 2014

Reviewer: Haritha Vellanki

Reviewer's report:

First off, I would like to congratulate the authors on accomplishing this study in this set up. I think this is a great study and has important implications for anyone interested in newborn resuscitation in low-resource settings. I have few queries, some comments and suggestions.

Major Compulsory Revisions

1. You acknowledge that the study was approved by the Nepal Health Research Council and the Ethical Review Board of Uppsala University, but I did not see any mention on whether consent was obtained from the families before video recording was done, or if the families were aware of the video recording. Could you please clarify.

2. The observation form that was used you stated had 14 sections that were filled out but you only listed 8 (place, date, time of resuscitation, whether the baby was crying when resuscitation was initiated, which specific resuscitation techniques were used, time intervals when they were performed, time to first cry and outcome). In figure 2, you show 12 variables. Could you clarify the inconsistency. If you could share the template of the observation form, that might be helpful. Also, was this form validated for use in your setting?

3. Could you clarify the guidelines currently in-place at your institution that were used to assess the resuscitations.

4. You mentioned in the background section that video recording can provide important information used for quality assessment and education as well as improving teamwork, leadership and communication within the resuscitation work group. I did not see any mention or evaluation of teamwork or communication skills during resuscitation process. You may want to clarify or talk about why that was not studied in your discussion.

5. It would have been useful and interesting to record how many of the deliveries were attended by qualified skilled birth attendants. You could use this data to maybe explain some of the deviation from guidelines during resuscitation.

Minor Essential Revisions

1. In the 1st paragraph under the section titled Background - you could consider changing the tense in the sentence to say: About 5-10% of babies do not spontaneously breath at birth and require some degree of assistance.
2. Last sentence in under the section titled background, may need to be shortened. You could consider saying: Video recording had great potential in optimizing newborn resuscitation and therefore further studies are needed to assess its validity and reliability.

3. 1st paragraph under the section titled Data Collection: the location of cameras needs to be better described. The current language used is a little confusing.

4. How were the resuscitation cases on the cameras matched to a case record form? Could you clarify.

5. In the 2nd paragraph under the section titled Data Analysis, did you mean: 50 CCD camera recordings were randomly selected (instead of randomized) out of 257 recorded in October and November 2012.

Discretionary Revisions

1. Could you clarify how heart rate was monitored (as you mentioned that pulse oximeters were not used due to technical difficulties)?

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

**Quality of written English:** Needs some language corrections before being published

**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