Reviewer’s report

Title: Impact of intervention on healthcare waste management practices in a tertiary care governmental hospital of Nepal

Version: 3  Date: 24 April 2014

Reviewer: Charles John J Palenik

Reviewer’s report:

Recommendation – Minor revision

General Comments

The authors revised their original manuscript in response to reviewers’ comments. There was definite improvement; however, there are still over 100 grammatical (spelling, verb-noun agreement, lack of modifiers, improper punctuation and lack of necessary modifiers). Such errors frustrate the reader, but also affect the meaning of important sentences. Also, there are several items that need clarification.

The effort is the first of its kind and is both interesting and important. The authors are encouraged to address the mentioned issues and to make modifications.

Specific Comment

Abstract, Page Two, Paragraph One

Changes and questions

These result in the production of non-hazardous waste (75–95%) and hazardous waste (10–25%) such as sharps, infectious body fluids, harmful chemicals, pharmaceuticals, radioactive waste, and pressurized containers (what are these ???). Improper healthcare waste management may lead to transmission of hepatitis B, Staphylococcus aureus and Pseudomonas aeruginosa.

Abstract, Page Two, Paragraph Two – Examples of improper English

Methods

This evaluation of waste management practices was carried out in gynecology, obstetrics, pediatrics, medicine and orthopedics wards of the Government of Nepal Civil Service Hospital, Kathmandu from February 12 to October 15, 2013. The Hospital provided ethical approval. An Individualized Rapid Assessment Tool (IRAT) developed by United Nations Development Program Global Environment Facility project was used to collect pre- and post-interventional performance scores concerning waste management. A healthcare waste management committee was formed of representing various departments. The study included responses from the focal nurses and physicians from gynecology, obstetrics, pediatrics, medicine and orthopedics wards, and waste handlers during the study
period. Data included average scores from 40 responders. Scores were based on compliance with the IRAT.

Introduction, Page Four, Paragraph Two - Change

“….more than 30 significant pathogens…”

Results, Page Eight, Paragraph Four

The Journal editors will have to decide whether to include the IRAT form or a truncated synopsis.

Discussion, Pages Nine-Eleven

Discussion Sections are to compare study results with those of other research efforts and NOT for repeating materials already presented in the Results Section. Prime examples are Paragraphs Two and Three on Page Ten. The Discussion must be shorted by at least 5