Reviewer’s report

Title: Epidemiology of Musculoskeletal Upper Extremity Ambulatory Surgery in the United States

Version: 2 Date: 27 September 2013

Reviewer: Helene M. Paarup

Reviewer’s report:

1. The objective is well defined and is
- to assess the overall and age-adjusted utilization rates of rotator cuff repair, shoulder arthroscopy performed for indications other than rotator cuff repair, carpal tunnel release, and wrist arthroscopy performed for indications other than carpal tunnel release in the United States.
- and to compare demographics, indications, and operating room time for these procedures.

2. + 3. Methods and data:

Data seem to be from the NSAS public data set. It must be considered of interest to the readers whether this is a public data set which can be accessed through a FTP-server – so this should be stated! So: Which kind of data and where they are from.

The parts of the database description which are not written by the authors and which are not written specifically for this manuscript must be given reference numbers. Reference numbers should be so used in a way that there is no doubt about whether the text (the database description) was written for this manuscript or found somewhere else. This also counts for the parts of the database description which can be found on the webpage for Centers for Disease Control and Prevention http://www.cdc.gov/nchs/nsas/nsas_sample_design.htm

You may consider either writing a sufficient description of the dataset including materials and methods or just referring to homepage with the right references. If you describe the material and methods shortly but sufficiently you can just add the reference numbers – it is not uncommon that that further details can be found in the original literature – so the line “Further details on the NSAS sampling procedures and survey can be found on the NSAS website 8,9.” is not necessary. Regarding references 8 and 9: It should be possible to find the webpage using a correctly written reference, although they can be found through Google as they are listed now.

Can you describe any comparability of assessment methods regarding the used data set? For instance the differences – in brief – between earlier and present data set as you have already stated (in ‘Background’) that the data set has been updated.
Could the variables be better described? (For instance different diagnostic criteria?)

What was the rationale behind the age groups? It seems interesting to know as the age range differs widely between the groups (30 years, 20 years, 10 years).

4. + 5. The manuscript:

In the present version the manuscript is a very short and little informative paper. Data – apparently from a public accessible data set – are well presented.

Regarding the ‘Background’: The disorders should be described by prevalence and incidence in the United States, by age and gender ratio. Causes could be stated and the surgery procedures. Without knowing this it is difficult to say whether there are too many or too few patients undergoing surgery – or as expected. And is health improved after surgery? It is necessary to know more about such things in order to use the information presented in the paper. Some of these issues was taken up in the ‘Discussion’ section, but should also be presented at the beginning.

Results that are presented in a table are easy to read. There is no need to present the results in the body text if the same results can be found in a table.

Conclusions should be made according to the objectives.

Whether policy makers or hospitals can use this paper is up to the policy makers and the hospital directors. They will use it - and cite you – if they can use the paper. Or if you know e.g. a specific hospital where you know they will use this paper you may describe more detailed how it can be used.

Regarding the expressions “To our knowledge, this is the first study reporting on...” and “We are not aware of data on shoulder arthroscopy performed on ambulatory or non-ambulatory basis”: Be careful with these expressions. There is always a risk that a manuscript does not present the first study, maybe because others have published similar data while this manuscript was in review, and there is the risk that you have just not found any existing literature on the topic because you did not search the right database.

6. Strengths and weaknesses should be considered. It is true that the lack of data from a few specified sources is a limitation. E.g. could the authors think of some strengths and weaknesses in the way they have used and presented these data?

7. Correct use and correct citation of references are important (references were not checked one by one during the reviewing the manuscript). Authors are expected to make sure that references are correct.

8. Title and abstract:

The title ‘Epidemiology of Musculoskeletal Upper Extremity Ambulatory Surgery in the United States’ could be more concise. E.g. "The utilization and clinical characteristics of shoulder and wrist ambulatory surgery in the United States".
In the abstract the ‘Background’ section only comprises the objectives.

**Level of interest:** An article whose findings are important to those with closely related research interests

**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