Reviewer's report

Title: Intravenous postoperative fluid prescriptions for children: A survey of practice

Version: 1 Date: 7 February 2008

Reviewer: Trevor Duke

Reviewer's report:

1. Is the question posed by the authors well defined?
   Reasonably
2. Are the methods appropriate and well described?
   OK
3. Are the data sound?
   OK, small numbers
4. Does the manuscript adhere to the relevant standards for reporting and data deposition?
   No
5. Are the discussion and conclusions well balanced and adequately supported by the data?
   No, the study is currently not well written
6. Are limitations of the work clearly stated?
   Somewhat
7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished?
   Yes
8. Do the title and abstract accurately convey what has been found?
   Title yes,
   Abstract, not literally (see below)
9. Is the writing acceptable?
   No, could be improved with some revision

This study was designed to measure the practice of surgeons and anaesthetists
in postoperative fluid prescribing for children. It is an important issue, but there are several problems with the study as it is currently written:

The year this study was done is not given. The paper describes how recommendations have changed recently, and suggests that this study should be repeated after these recommendation changes, but it would be important to know the actual date the survey was conducted.

The language the report is written in does not always reflect the methodology. This was a survey of reported practice based on scenarios, but some of the words imply it measured in real life what fluids were given: âMost children were prescribed hypotonic fluidsâ. More accurately this should be something like: âMost doctors said they would prescribe hypotonic fluidâ.

The opening sentence of the second par could be better written. âThe danger of hyponatraemia is cerebral oedema resulting ultimately in tentorial herniation.â While this is true, perhaps it might be better to sayâresulting in seizures, neurological deterioration and sometimes in tentorial herniation and deathâ.

The next sentence should have the word âifâ instead of âbecauseâ. Because implies that increased ADH is always a feature of the surgical stress response.

In the methods section only 2 âclinical scenariosâ are described. The following sentence (middle of page 4) says that âThe questionnaire stated that all three children were wellâ. Were three or 2 clinical scenarios used in the survey? Tables 1 & 2 suggest there were 3 cases, but we cannot interpret much of the data presented if we donât know what the cases were. This is obviously a fundamental problem with the way the study is currently presented.

It is surprising to me that only 3 (or 2) scenarios we used; given the diversity of paediatric surgical cases I would have thought a more informative approach would have surveyed on a few more cases.

On page 8, the sentence: âWorryingly between 8% and 38.8% of respondentsâ I guess this reflects the responses to the 3 cases (Table 2), but it is unclear exactly what it means. It is a range that is summarizing results from data that are split according to specialist group and individual scenario.