Reviewer's report

Title: Classification of healthcare-associated infection: a systematic review 10 years after the first proposal

Version: 1 Date: 9 December 2013

Reviewer: Daniel Sexton

Reviewer's report:

Major compulsory revisions---an attempt should be made to shorten the length of some of the tables.

Minor essential revisions--none

Discretionary revisions--the discussion section could be strengthened by providing clearer suggestions for the next step---establishing a consensus uniform definition of HCA--it seems obvious to me that the logical group to do this should be the CDC and/or the WHO. Similarly the discussion doesn't provide enough information (or perhaps opinion) why certain additional criteria such as "contact with a person with a MDR organism" is inadequate and unwise to use as a criterion for defining an infections as HCA. Also no mention is made of the new definitions of Lab-ID infections (bloodstream, CDI) which do not include a simple concise category for HCA infections--can the authors comment on the ramifications of this new and less precise surveillance definition. And finally, do the authors wish to comment as to whether it is logical or reasonable to consider using different definitions for the category "HCA" in different types of infections---e.g. CDI vs BSI vs UTI?

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

see above comments to the editors...I have have NO other competing interests.