**Reviewer’s report**

**Title:** Efficacy of premedication with intranasal dexmedetomidine for removal of inhaled foreign bodies in children by flexible fiberoptic bronchoscopy: a randomized, double-blind, placebo-controlled clinical trial

**Version:** 1  **Date:** 03 Oct 2019

**Reviewer:** Reviewer 2

**Reviewer's report:**

PEER REVIEWER ASSESSMENTS:

**OBJECTIVE** - Full research articles: is there a clear objective that addresses one or several testable research questions? (Brief or other article types: is there a clear objective?)

Yes - there is a clear objective

**DESIGN** - Is the current approach (including controls and analysis protocols) appropriate for the objective?

Yes - the approach is appropriate

**EXECUTION** - Are the experiments and analyses performed with sufficient technical rigor to allow confidence in the results?

Yes - experiments and analyses were performed appropriately

**STATISTICS** - Is the use of statistics in the manuscript appropriate?

Yes - appropriate statistical analyses have been used in the study

**INTERPRETATION** - Is the current interpretation/discussion of the results reasonable and not overstated?

Yes - the author's interpretation is reasonable
OVERALL MANUSCRIPT POTENTIAL - Has the author addressed your concerns sufficiently for you to now recommend the work as a technically sound contribution? If not, can further revisions be made to make the work technically sound?

Probably - with minor revisions

PEER REVIEWER COMMENTS:

GENERAL COMMENTS: The authors have addressed the reviewers´comments adequately. The modifications made in the manuscript make it more clear. Nevertheless, foreign body removal by means of flexible bronchoscopy in children is not the standard technique and rigid bronchoscopy is the technique of choice. This issue should be more clearly stated in the manuscript in order not to mislead the potential reader.

ADDITIONAL REQUESTS/SUGGESTIONS:

The authors should explain thoroughly the reasons for doing flexible bronchoscopy instead of rigid bronchoscopy when removing foreign bodies in children. This is not the standard procedure especially in small children. I am aware that the aims of the study rely in other aspects related to sedation, general anesthesia, etc. but this information may be misleading. Moreover, they say that they use a flexible bronchoscope of 2.8mm but they don´t state the size of the working channel, which should be around 1 mm. What kind of forceps or basket are they able to use with such a small working channel? This issue should be addressed too.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable

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