Reviewer’s report

Title: Chest pain in the emergency department: risk stratification with Manchester triage system and HEART score

Version: 4 Date: 30 November 2014

Reviewer: Ulf Ekelund

Reviewer’s report:

In general, the authors have agreed to make the changes I suggested.

Discretionary Revisions

Regarding the authors’ response (previous line 294): "According to the Portuguese Stent For Life initiative (www.stentforlife.pt) for 2013, only 38% of the Portuguese STEMI patients had called the Emergency Medical Services Systems. This means that in our country the majority of the STEMI patients go directly to a health care institution. Therefore we consider that one of the main consequences of a non-reliable triage is to delay the time from patient arrival to ECG acquisition, potentially delaying reperfusion therapy for STEMI patients."

This logic is not obvious to me. The important thing here is the number of STEMI vs NSTEMI/UA patients presenting to the ED. I would guess that the STEMI-patients are a clear minority.

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

Quality of written English: Acceptable

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

Declaration of competing interests:

I declare that I have no competing interests