Author’s response to reviews

Title: High inter-observer agreement of observer-perceived pain assessment in the emergency department

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Author’s response to reviews:

Thank you again for considering our paper for publication and for the comments.

We have made the final corrections according to the reviewers comments and the paper should now meet your requirements.

Our correction are shown point-by-point below and shown in the paper using track-changes.

Reviewer reports:

Yves Chaput (Reviewer 1): Thank you for again giving me the opportunity to review this revised manuscript.

I previously made a series of comments to the authors, both major and minor. Overall I feel the authors have done a splendid job responding to my queries. More specifically regarding my first major comment, that concerning the writing style they have made great strides here. There has been a complete rewrite and clearly for the better. The manuscript now flows quite well from the background to the conclusion section. Still not perfect but more that acceptable in terms of publication standards. My second major point, that concerning the use of references, was also addressed by the authors, as was my third major point, that concerning the "not too clear" stated aims of the present study and the lack of variable definitions in the Methods section. My statistical concerns about the methodology used were clearly answered by the authors also.
As such I only have 2 minor points to ask the authors to comment on. Also, I have raised a few "style" comments that the authors a free to look at (or not) that might help further improve their manuscript. These latter are mere suggestions though.

General Minor point 1:

I still have a bit of difficulty with the fourth paragraph of the Discussion section. First, the authors state that the nursing perceived pain assessment in the Ed is 'quite independent' of the observer. Here again if we go strictly back to the Kappa this conclusion is somewhat inaccurate. It at best moderate and one could even state that this is a bit surprising given the level of staff training. If one goes by the "category" score (a larger definition of inter rater reliability) then the phrase appears to be quite accurate. As for the following phrase "For the vast majority of patients, the triage level would not have been depending on the observer assessment". I have no idea what this phrase means. Overall my suggestion would be to rework this paragraph in terms of clarity.

Our respond:

We agree. We have made the following rewriting (P6L4-10):

“Our results have some clinical implications. The inter-observer agreement was lower than we had expected in a group of experienced ED nurses, who were well trained in using the NRS scale, but we found high inter-observer agreement when pain scores were transferred to commonly used pain categories. Also, the assessment of patient pain intensity was not influenced by different patient groups, age, gender, or other circumstances. Thus, our results justifies that nurse-perceived pain assessment is used for triage in the emergency department.”

This rewriting has caused small changes throughout the document. These can be seen in the document with track-changes
Reviewer reports:

General minor point 2:

Pertains to the word "relative". In North American EDs patients are often accompanied by a significant other (common law partner for instance, girlfriend/boyfriend or a care giver who knows the patient for many years). These are not "relatives" in the classic sense. I'm just wondering whether the authors are using the word "relative" in a broad sense here or in a strictly limited sense. If in the broad sense then perhaps "significant other" may be a better term.

Our respond:

Thank you for clarifying this. “Relative” has been changed to “significant other” throughout the paper.

Reviewer reports:

Style comments :

1st style point: in the background section, third paragraph, I would slightly rephrase the passage beginning with "In the Danish Emergency Process Triage), which has been implemented in most Danish EDs (9), patient-reported pain is validated by a nurse to ensure that patients do not deliberately exaggerate their pain in order to receive a higher priority as well as ensuring that patients are not overlooked in the ED…”

For political correctness it may be better to rephrase to something like "In the Danish Emergency Process Triage (DEPT), which has been implemented in most Danish EDs (9), patient-reported pain is validated by a nurse to ensure that it is neither over nor underreported, resulting in a patient receiving a higher triage priority than warranted or, alternatively, that a patient might be overlooked in the ED. "

Our respond:

We agree with the reviewer and the paragraph has been rephrased according to the reviewer’s proposal.

Reviewer reports:

2nd style point:

Still in the background section I would combine the last 2 paragraphs in the following way:

However, observer-perceived pain assessments in the triage process require a certain level of agreement between ED nurses when rating patient pain. Thus far, no studies have examined the inter-observer agreement of perceived pain among nurses in an ED setting, which is the primary aim of this study. As a secondary aim we assessed whether patient location (emergency room or a ward room), type of pain or the presence of a relative would affect this inter-observer agreement.

Our respond:

The paragraph has been rephrased according to the reviewer’s proposal.

Reviewer reports:

3rd style point: In the first paragraph of the Methods section "This was a cross-sectional, single….conducted at the ED of the Southern Jutland Hospital, Denmark,…".

Our respond:

We are not sure, what changes the reviewer wants to be made. No changes has been made in the paragraph.
Reviewer reports:

4th style point: In the third paragraph of the Methods section "Two project assistants identified… and received the informed consent form to…".

Our respond:

We are not sure, what changes the reviewer wants to be made. No changes have been made in the paragraph.

Reviewer reports:

5th style point: In the first paragraph of the Results section "Most of the data (76%) was collected during the daytime hours (9 am to 6 pm) with 57% of inclusions performed before 2 pm".

Our respond:

We are not sure, what changes the reviewer wants to be made. No changes have been made in the paragraph.

Reviewer reports:

6th style point: In TABLE 1 there is a grammatical error in the title (af 162 patients). Perception may also require an 's' as it is the perceptions on 162 patients by a series of 2 nurses (but I would check on this one as I'm not quite certain).

Thank you for pointing this out. The changes have been made.
Reviewer reports:

7th style point: In the Discussion section, third paragraph, "Few studies have compared the inter-observer… " there is an "in" missing before "emergency departments".

Thank you for pointing this out. The changes have been made.

Reviewer reports:

8th style point: In the Discussion section, third paragraph, "Furthermore, pain assessment tools….or other conditions that might alter a patient's perceptual awareness"

Our respond:

We are not sure, what changes the reviewer wants to be made. No changes have been made in the paragraph