Author’s response to reviews

Title: Body temperature measurement in ambulance: a challenge of 21-st century?

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Author’s response to reviews:

Anne Jones (Reviewer 1): Thank you for the opportunity to review this paper.

You need to provide more specific detail on your methodology. Comments have been made int eh paper.

Changes are in colour

You need to look at the limitations of your study and how this then may affect your conclusions.

The paragraph pertaining to the limitations has been added

You need to link your discussion more to why this paper is important. Look at the generalisability of your findings

Changes are in colour

Hagos Tasew Atalay, MSc (Reviewer 2): Thank you for giving opportunity to review your article.

My first concern is What is the significance of this study? If you know surface temperature but not core temperature, what will be the basic significance difference in clinical management?

The gradient between core and surface temperature may be so high in outdoor conditions that skin temperature does not reflect Tc.
What is the implication of measuring core temperature?

It is precisely explained in Introduction, lines 24 – 56.

Your study design, study participants were not clear? You said survey method so, what survey you are used?

Participants are EMS operators. The survey form is described in Methods, lines 17 – 22.

How do you come up your final simple size?

I’m sorry, I do not understand this question

How do you select the ambulances?

All operators = all ambulances were surveyed

How do you analyzed your data?

Descriptive statistics were used

You find 3.28% of ground ambulances used core temperature could you justify it why happening this?

Lack of legal requirements. Similar results were obtained in studies from Norway, Sweden, and UK.

I assume that measuring surface temperature was enough.

International guidelines disagree with this opinion and require core temperature measurement.

What was your conclusion?

Page 7, lines 48 – 56.