Reviewer’s report

Title: Uncompleted emergency department care and discharge against medical advice in patients with neurological complaints: a chart review.

Version: 1 Date: 16 Jun 2019

Reviewer: Denise F. Blake

Reviewer's report:

Thank you for allowing me to review your manuscript. The area of discharge against medical advice is extremely important in emergency medicine. The term premature leave is not commonly used in ED research and is not accurate enough. When googling this term I got websites for premature ejaculation. You identify that this group of patients may be rather heterogeneous, patients not telling staff that they were leaving after treatment had commenced and patients not waiting to be seen by a physician. I would like to see a breakdown of this group to better outline their characteristics. How did you get diagnosis for this group of patients? If they did not wait was this coded as such?

In the introduction you do not clearly outline why you think an analysis of neurological patients is important. Are they at higher risk of bad outcomes in general? High percentage of overall ED visits? Your final sentence in the introduction states that you will assess the characteristics of patients admitted to the ED for neurological evaluation. This is not the hypothesis that you seem to be trying to present in the paper. Needs to be changed to better reflect you research. Needs a hypothesis or research question.

This is not an observational study, it is a retrospective chart review. Observational assumes prospective review.

I found the methods difficult to follow with some results presented in the opening paragraph rather than in the results section. Describe your ED-adult only? Trauma centre? Neurological specialty centre? Size of city? How were patients identified? Diagnosis from computer system? What computer software used? What diagnosis did you search for? Only referrals to neurologist?

Under methods move the analysis section to the statistical section and list data collected here. Need to clearly outline the terms you used to find patients in your system-presenting complaint vs discharge diagnosis. You list the Royl article in the table 1. Is this what you used to define your terms?

Use consistent terms between text and tables. In text you say "living in local area" and in table you have urban area. Are these the patients all within 25 km of hospital?

I would remove the term discharged "regularly". I know what you are trying to say but I think just admitted or discharged is fine. The DAMA/PL patients were not admitted or discharged.
You need to clarify your hypothesis, data collected and analysis plan. These areas should clearly flow but your hypothesis is vague and your conclusion had nothing to do with your results. The conclusion needs to be your results.

Did you check for normality in your data? You have very large SD which makes me think that some of your data is not normally distributed and median (IQR) should be use rather than mean (SD). Please add a 0 before all of the . in your P values in the text and tables.

What is self initiated presentation? Should you change this to mode of arrival? Did the patients who came by EMS not self initiate the call? Perhaps state why an ED physician would be on some of the EMS calls? Dispatch for sick patients? Luck of the draw?

The patients who left after admission indicated would be interesting to say if these were the ones who subsequently got admitted.

In the cases that stated need to wait as reason for leaving was this for tests? again waiting time has large SD. Should this be median? Could you compare this to the whole group?

Do not repeat data in manuscript and tables/figures. These items should supplement each other. Figure 1 is unnecessary. Figure 2 is replicating data as well. Decide which modality best presents your data and use that. Figure 4-clean it up, either alphabetical order or most frequent to least, something organized.

Table 2 what is the W for in sex? Seems like 8, 13 and 14 had different second diagnoses. Was the original diagnosis missed? Investigations not completed?

I would not use "latter two" or retrospectively. This terms make the reader have to think about which results go together. Make it simple, clear and easy for the reader.

Put like results together in the manuscript. Have all sex and age results listed together. (first paragraph under demographics) % admitted and discharged aren't demographics. Review this paragraph and re-write or change title.

Why did you not include other hospitals in the area to see if patients presented there? Death registry for results? Just outline how many other EDs are in town, difficulty obtaining results etc. In discussion change ED representations in the "next month" to 30 days, not all months are the same length.

Conclusion: This has nothing to do with your results. You do not assess any structural issues in your paper. This may be listed as areas for possible investigation at the end of your discussion but the conclusion needs to be what you conclude from your study.
References: recent study below might help you with the flow of your paper. Second one is a review article


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PMCID: PMC5557136 PMID: 28848631

Discharge against medical advice (DAMA): Causes and predictors

Ensieh Ashrafi,1 Samin Nobakht,2 Meysam Safi Keykaleh,3 Edris Kakemam,4 Edris Hasanpoor,5 and Mobin Sokhanva

Good review article:

PMCID: PMC2664598 PMID: 19252113

"I'm Going Home": Discharges Against Medical Advice

David J. Alfandre, MD

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

No

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.

No

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 recommend additional statistical review

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Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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