Author’s response to reviews

Title: Predictors of mortality and validation of burn mortality prognostic scores in a Malaysian burns intensive care unit

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Prof Amelia De Salis
Assistant Editor in Chief
BMC Emergency Medicine
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Sub: Reply to Editor and Reviewer comments

Dear Prof Amelia De Salis / Prof Swapna Munnangi,

We would like to express our deepest appreciation in the time given to reply and comments given to improve this article. We hope this current revision may be accepted for publication. The response to each comment is as below:-
Editor reports:

We note that you have included a ‘Consent for publication’ section in the Declarations. Consent for publication refers to consent for the publication of identifying images or other personal or clinical details of participants that compromise anonymity. Seeing as this is not applicable to your manuscript please state “Not Applicable” in this section.

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-- Please represent authors' names using their full initials, not their full name, in the Authors’ Contributions section. If there are any duplicated initials, please differentiate them to make it clear that the initials refer to separate authors.

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-- We notice that author Mohamad Azim Md. Idris is missing from the authors' contributions section. The individual contributions of all authors to the manuscript should be specified in the Authors’ Contributions section. Guidance and criteria for authorship can be found here: http://www.biomedcentral.com/submissions/editorial-policies#authorship

Sorry for the mistake. We have added in Mohamad Azim Md. Idris to the authors contribution section.

-- Please rename the 'Data availability' heading to 'Availability of Data and Materials'.

Done.

-- Please rename the 'Introduction' heading to 'Background'.

Done.

-- At this stage, please upload your manuscript as a single, final, clean version that does not contain any tracked changes, comments, highlights, strikethroughs or text in different colours. All relevant tables/figures/additional files should also be clean versions. Figures (and additional files) should remain uploaded as separate files.

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Reviewer reports:

hasan aldinc (Reviewer 3): Dear Author,

1. According to the inclusion criteria, patients with blunt trauma (especially traffic accidents) may have much more mortal health conditions (intracranial bleeding, blood loss, chest trauma etc.). This is a limitation of this study an should be written. Yes the results are about burned patient mortality, but not burn mortality.
Three sentences have been added a sub paragraph under “study limitation“. “Despite validating these burn mortality scores, there is a possible higher significant number of deaths in patients which were involved with blunt trauma. This is especially seen in road traffic accident patients which may have polytrauma which may lead to death instead of the burn injury. This is a limitation of this current study which may possibly addressed in future retrospective studies.”

2. In the results, L14-18, you defined the time from injury to arrival of BICU results. This is unnecessary because it can be easily expected.
L14-L18 in the results portion have been deleted.

Zi Qin Ng, MBBS (Hons) (Reviewer 4): I would like to congratulate the authors for their work.
The authors have made significant amendments to the manuscript following the feedback from the previous reviewers.

I have only a few comments for the manuscript:

1. The inclusion criteria included patients in the paediatric population (ie &lt;18 years). Is there a subgroup analysis to validate the various burns score?
There was no subgroup analysis for the paediatric subgroup population. This was because most of the paediatric burns were managed in another paediatric surgery department in another government tertiary hospital facility. Therefore, most of the cases which was managed were mainly adult aged and size.

2. Under the methods section, it was mentioned that any discrepancies in data was discussed with the burn’s surgeon first. Was there a data manager that perform the data collection? It might be worth stating under the last part of the discussion as a limitation.

We have added it into a new sub paragraph “study limitation” – “In addition, although there were dedicated burn trauma nurses for data collection, we did not have a luxury to have a data manager. Most of the data collected were through the concerted of nurses under the direct supervision of the burns and trauma surgeon.”

Thanking you for your time on behalf of all co-authors and hope for a positive reply.

Sincerely and on behalf of all co-authors,

Henry
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