Reviewer’s report

Title: Towards a patient journey perspective on causes of unplanned readmissions using a classification framework. Results of a systematic review with a narrative synthesis.

Version: 0 Date: 24 Jan 2019

Reviewer: Kasey Boehmer

Reviewer's report:

Thank you for the opportunity to review this manuscript. Overall, this is a well conducted systematic review that seeks to classify they different types of preventable readmissions. The study requires minor revisions prior to publication.

First, it is unclear to me why interventions are discussed. To me, this seemed like an afterthought, as it doesn't appear studies were excluded based upon interventions/no interventions, and it broke up the otherwise very clear results section. Because there are other reviews that clearly focus on interventions in depth (e.g., Leppin et al, JAMA Internal Medicine 2014), I don't think discussion of interventions is necessary for this paper to make a contribution to the literature. Therefore, I would recommend the authors either strengthen the reasoning behind the inclusion of interventions in the manuscript, or remove the references in methods and results to these findings.

Second, I found one of the most interesting parts of the paper the causes of readmissions that were classified as preventable in some studies but unpreventable in others. I see in the additional file there is detailed information regarding each cause within each study. Is there some way to summarize this information in a main table, figure, or the body of the paper about which causes were described as both? I think this may be of interest to researchers/policy makers in order to come up with a more standard definition of preventable vs unpreventable. In the discussion section, I would like to see the authors point to whether they think these conflicting classifications are problematic or are they justified?

Third, Table 3 is helpful, but I am wondering if there is also a way to visually represent the classification framework? Are these classifications in any way related to each other, or are they entirely separate? For example, would human - care provider, be underneath and related to organization- department level care? These do not seem independent to me and it would be helpful to clarify for the reader how they are related or unrelated. Visualization could be one way to do this.

Finally, I would like to see patient-centered language used instead of "non-compliance."
Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

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?
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Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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Not relevant to this manuscript

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Please indicate the quality of language in the manuscript:

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