**Author’s response to reviews**

**Title:** Trends in Diagnostic Approaches for Pediatric Appendicitis: Nationwide Population-Based Study

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Reply to Editors and Reviewers

The authors thank the editors and the reviewers for further comprehensive review in our revised manuscript. We have revised the manuscript based on the reviewer’s suggestions. The revised and added contents in the revised manuscript are underlined.

Reply to reviewer’s queries

(1) Reply to reviewer 1

Query Thank you for submitting the revised version of the manuscript. You have taken time to address my initial concerns and I am okay to recommend your article for publication. It is unfortunate that important information such as duration of symptoms and latency period from clinical presentation to performing US and CT scans were not provided in the database, as well as more information on negative appendectomies. This information would have helped the readers have a better understanding of the key results. However, these limitations were clearly stated in the discussion, hopefully in the future more information would be available to researchers through the NHI database. I still do not see the historical reference in the background section suggesting that even with advances in US and CT imaging, perforation rates in children...
under 6 years was 54-74% over the last 3 decades- which informed the decision to categorize the data into 3 age groups. I believe this information is important and should be included in the background section. Thanks again for your submission.

Answer: Thank you for your kind and valuable comment. We added description in the Background section based on your opinion: Perforation rate of pediatric appendicitis was relatively high in preschool age group and the rate of perforation was inversely proportional to patient age, occurring in 57% ages 4-5 years to 100% aged < 1 year [6]. Even with advances in US and CT imaging, perforation rates in children under 6 years was 51-100 % over past decades [7-9] (underlined in the Background section). The cited reference No.6-9 were added in the new revised manuscript (underlined at reference No. 6-9 in the Reference section), the original cited references No. 6-28 were changed to references No. 10-32.

(2) Reply to Technical comments

1. Declarations:

Please provide a complete and correctly formatted Declarations section before the references, in accordance with the submission guidelines.

We appreciate that you may have supplied some of the information in the body of the manuscript.

Please use the section headings below:

- Ethics approval and consent to participate
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Answer: Based on your instruction, we supplied information in all the section headings in the Declarations sections (page 15-17)

2. Figure:

Please remove the figure caption(s)/title(s) from within the image files. These files should contain the image graphic (and any associated keys) only. Please place the caption(s)/title(s) as text within the manuscript file (usually after the references).

Answer: Thank you for your corrections, we removed the figure caption(s)/title(s) from within the image files.

3. If improvements to the English language within your manuscript have been requested, you should have your manuscript reviewed by someone who is fluent in English.

Answer: The manuscript was English edited by Prof. Winston W. Shen, a Psychiatrist who is fluent in English.