Author’s response to reviews

Title: Kinematic real-time feedback is more effective than traditional teaching method in learning ankle joint mobilisation: a randomised controlled trial

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RESPONSE TO REVIEWERS: Itemized List

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Editor

Miriam Rüsseler

We would like to thank the Reviewer for their thoughtful and constructive comments. We have considered all suggestions and have incorporated them into the revised manuscript. Changes to the original manuscript have been made using with “track changes” and are highlighted (in yellow background). After the corrections made, we believe that our document is much easier to read and understand. An itemized point-by-point response to the Reviewers’ comments is presented below.
Reviewer reports:

Dear authors,

thank you for the resubmitted manuscript. You did a great deal of work rewriting the manuscript, which is highly improved. Especially, the new introduction received a broader educational background and will be of interest for a broader audience.

Authors: We thank you for your comment.

Regarding the results, the conversion of the data into a figure made the understanding of your results much easier. Though, you did not transfer the levels of significance into the figure, hereby, diminishing an important aspect of your results. Please consider to also transform the other tables into figures for an easier understanding of your results.

Authors: We thank you for your suggestion. We have added the levels of significance into figure 3. The authors are agree with the idea that to include the levels of significance into the figure increase the quality of them. Thank you very much for the comment.

In addition, we have created a new figure (Figure 4) where the consistence of the mobilizations could be compared much more easily. At the same time, we consider that the results presented in tables 1 and 2 are more relevant with this format because it facilitates the interpretation of the rest data/figure. We have modified the format of the tables 1 and 2 to facilitate their interpretation.

As indicated in the first review, the discussion could be improved by focusing on the aspect of real time feedback, the results of your study and its transferability to other areas in medical education. Unfortunately, this was only slightly implemented. Thus, the discussion is still focussed and herewith only of interest for a small number of experts in the field of manual therapy.

Authors: We thank you for your comment. We have created a new sub-heading within the discussion section where the transferability of the KRTF to others medial areas could be possible and useful.