Reviewer’s report

Title: Incidence and Predictors of Groin Complications Early after Coronary Artery Intervention: A prospective Observational Study

Version: 0 Date: 08 Nov 2018

Reviewer: Geraldine Lee

Reviewer's report:

Please include all comments for the authors in this box rather than uploading your report as an attachment. Please only upload as attachments annotated versions of manuscripts, graphs, supporting materials or other aspects of your report which cannot be included in a text format.

Please overwrite this text when adding your comments to the authors.

This paper offers a good overview of complications after PCI and is a good sample size examining complications from the Middle-East where there is a paucity of data.

Abstract: Remove the comment that PCI is the gold standard for CAD management and reduce the background detail. CAD can be optimally managed with medical management so best to avoid making this statement about gold standard. Background should be one sentence with more of results.

For the abstract, please add more details from your predictors in the results as this has not been included and should be.
Main paper:

Methodology: Your objectives are clear but do not include anything about nurses being able to identify predictors- this is beyond the scope of the paper and remove this from the conclusion as it does not support the paper's content.

Please state if patients were all elective or whether emergency cases were included. As you state patients were consented, I am assuming they were not unstable and were electives but it needs to be overt.

Change wording about exclusion criteria- it is not appropriate to call people 'incompetent'- line 32. Change to 'unable to consent due to existing psychiatric conditions.'

Setting: Need to state how many procedures are done annually as we need to be able to contextualise the 300. Also how many cardiologists are there and is there any information on staffing and patient length of stay. Need to add more detail about the setting.

Was your observation sheet based on any literature?

Who measured the complications? How was this verified and was there agreement on the complications?

Data: How had access to the data?

Results: You need to undertake separate analysis between males and females for BMI as a mean across the genders is not appropriate. Need to present them separately and similarly with BP- did you analyse the males and females separately to ensure there is no difference before you undertake regression analyses.

With the mean heart rate of 76- how many patients were beta-blocked?

With the predictors in the results, add these to the abstract.
Discussion:

The discussion is too long and needs to be more precise and concise. It should focus on the 3 objectives stated and then examining the findings in relation to the relevant literature. It should be 1/3 of the length.

Limitations need to be acknowledged.

Conclusion: As above- remove the comment about nurses as you have no evidence to support this statement.

Other changes:

Page 1, line 54- change rolled to to 'identified'

There are far too many abbreviations n the paper- remove all those for HTN, DM, PVD, RF and put these in full.

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?
If not, please explain in your comments to the authors.

Yes

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.

Not relevant to this manuscript
Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable

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