Reviewer’s report

Title: International approaches to paediatric podiatry curricula: It’s the same, but different

Version: 0 Date: 10 Apr 2019

Reviewer: Stefania Penkala

Reviewer’s report:

Thank you for the opportunity to review this paper.

The paper is of general interest to the profession, but a very valuable start to highlight the need of paediatric education within the profession. Valuable for academic/s educational institutions and the profession to build on this brief start up work. Well done for starting this process. As an initial project there will be limitations as you have noted and I look forward to further work in this area to strengthen an area of practice so important to child development and general longevity across the lifespan. This paper has demonstrated the limited paediatric content/time in curriculum which also seems to be an issue across professions. This paper should be helpful as a start to build on this emphasis in curriculum i.e. promote more substantial undergraduate education focus in this area.

I have added comment to strengthen the submission.

Introduction

L 5-10. Page4. While 'multi-professional landscape' is noted I think many Podiatrists are not necessarily working in a multi-disciplinary unit. I think an important skill set in paediatrics is also to identify needs for referral. Think adding this point would be beneficial in this section.

Survey development

L25-27 Page 6. This sentence does not read well. Maybe 'This ensured that language was relevant and that each question response was consistent with the survey aims'

Data management and analysis

L 45-52 Page7 Understand that when multiple people from one university responded, only the primary person teaching paediatric content was included in the main analysis. But given there were different responses, this probably reflects the different less formal ways paediatric content may be included in the content delivery, it would be worthwhile providing a sub analysis of this data.
L 59 Page7. While the use of descriptive statistics is identified I think it would be beneficial to be more precise. i.e. as data was not normality distributed median and interquartile range were used.

L 1-2 Page8. This section indicates participant qualitative comments were coded against content heading. But there is no evidence of this in the results. This type of analysis normally helps to strength / increase depth of the findings. Suggest this data is included.

Assessment and competency
L38 Page9. Be consistent with heading 'Competency' should be 'competency' i.e. others sections have not included the capitalisation beyond the first word.

L46 Page9. The end of this sentence is unclear. The double use of 'no' is confusing. This could be re-written as 'no other universities had a minimum requirement' OR 'others universities had no minimum requirement'

L10-12 Page10. This sentence reads oddly and could be in part addressed by comments in the method section. 'Universities used a median (IQR) of 3 (1, 4.25) methods of........' . I also suggest to have the precision of the IQR to two decimal points is not necessary for the numbers of assessments in paediatric undergraduate education. It is also not consistent with the level of precise reported in the % data, nor in other sections reporting median (IQR) ie L56 page8 Suggest the format in L56 page8 could be used i.e 'median of 9.5 (IQR 8-10)'

Discussion
L50-53 Page 10. New results are introduced in the discussion, which should ideally be identified firstly in the results. i.e hours of paediatrics training should be noted in the results.

The discussion could be strengthened by providing the comparisons between the evidence identified in the introduction. i.e. comparison to OT literature. This then provides better linkage to multi-professional landscape'

Table 1
L25 - 28 Page 16. The heading 'All n (% of 20)', column needs to be adjusted so heading on one line (consistent with others)

Table 1 and Table 2
Suggest the data columns are aligned

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