Reviewer's report

Title: Early Integrated Palliative Care in Chronic Heart Failure and Chronic Obstructive Pulmonary Disease: protocol of a feasibility before-after intervention study.

Version: 0 Date: 13 Nov 2018

Reviewer: Yi-Sheng Chao

Reviewer's report:

Comments

This is a protocol for a feasibility study. There are several outstanding issues to be resolved, before being considered for publication.

Major issues

1. Based on the trial registration dates (2015), this study is probably ongoing or almost finished. The authors might be worried about the early release of the protocol. It would be nice to mention the progress of the trial.

2. The definition of feasibility is unclear. The outcome measures in this study seem to be quality of care and quality of life. I don't think they represent so-called feasibility in this trial very well. In fact, the professionals were involved. I think they know feasibility the best, but there don't seem to be any measurement about the professionals.

3. The referencing style is not up to publication standard. Many statements did not include references. For example, CHF and COPD are the third cause of death. I don't believe this statement. The first sentence of the second and third paragraph in the Background needs some evidence.

4. Why these two diseases can be treated with the same intervention is not convincing. Based on the study design, the authors aim to recruit patients with both CHF and COPD. The reason to recruit patients with BOTH CHF and COPD does not seem to make sense. Claiming the coexistence of both CHF and COPD to be the third leading cause of death is not well founded.

5. The authors identified baseline and intervention groups, but they were the same individuals. Using unexposed and exposed patients might be better.

6. The timeline is not well explained. There seem to be follow-ups three months after baseline and intervention. In the study design, other time constraints, such as total study time, were also mentioned. These time constraints further confused the readers. Please add total study time and follow-up and evaluation time points in Figure 1.
Minor issues

7. The writing style is not optimal. "Palliative care aims to optimize the quality of life for patients with…." In the Abstract. This is not right. Please described palliative care in general, what patients are using it, the use of PC in patients with CHF and COPD, and the gap in the use of PC in these patients. This will help the readers to understand the objective the authors were pursuing.

8. Adding examples in the end of 2nd paragraph in Background may help.

9. Avoid convenient sample. Describe where, how and when the patients were recruited instead.

10. It will be nice to add how many items in the questionnaire sections.

11. Line 209: add "be" before communicated.

12. Add reference to the Early Integrated Palliative Care Planning Intervention, since it was validated.

13. Add versions and manufacturers to SPSS and Excel.

14. Are the t tests paired for the pre- and post-comparisons?

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An article of limited interest

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Please indicate the quality of language in the manuscript:

Needs some language corrections before being published
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