OPEN PEER REVIEW

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As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

## What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

## Advantages of "Open Peer Review" process

- More transparency, constructiveness and tactful comments of the peer review process: leads to an increase in the quality of reviews
- More motivations for all involved roles in the review process
- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

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# Peer Review Report for "Protection of Health Workers From Tuberculosis"

**Author(s):** Aysun Acun

## Review Timeline:

Submit Date: 9 May 2020
Revised Date: 26 May 2020
Accepted Date: 3 Jun 2020

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

**REFEREE**: Reviewer | **Revision** (0)

14 May 2020

Dear AE,
This is an interesting article about the protection of health care workers from TB. A few suggestions are recommended to the authors for improving the article.
- Please add more information about the following study on page 4 to show what undesired levels mean: "In another study that included 126 family physicians working in primary healthcare institutions in Sakarya in Turkey, it was found that the knowledge levels on Tuberculosis of family physicians were not at the desired levels and that they needed training programs to increase their awareness and to ensure that accurate approaches were adopted."
- On page 5, it was mentioned that prophylactic treatment is prescribed for PPD test scores at or above 15 mm. Please explain more about this in detail, and notify about PPD conversion as well.
- On page 7, clarify which rapid diagnostic kits you are mentioning.
- Explaining more about PPE for TB would be helpful.
- If you have any data about the incidence of TB in Turkey, add it to the article.
- The article has few editing issues that need to be corrected.
Thanks.

**REFEREE**: Reviewer | **Revision** (0)

16 May 2020

Dear AE,
I have read the manuscript entitled “PROTECTION OF HEALTH WORKERS FROM TUBERCULOSIS” which studies the protection from tuberculosis in the scope of administrative, environmental, and respiratory tract measures. In this article, valuable content is presented that is significant for healthcare system managers and employees. However, there are some points that should be commented on. In my opinion, it is better the authors follow the below points.
1. The English language of the manuscript is not sufficient and there are still grammatical errors in the entire text. Please recheck it. Camma, dots, spacing, capital letters…….
2. With respect to the authors, It is recommended that new achievements in disease protection and prevention be listed in a table.
Kindest Regards

**Masoud Salehi**: Associate Editor | **Revision (0)** 16 May 2020

Dear EIC,
This is an interesting article about the protection of health care workers from TB. A few suggestions are recommended to the authors for making the article more acceptable for publication.
- Please add more information about the following study on page 4 to show what undesired levels mean: "In another study that included 126 family physicians working in primary healthcare institutions in Sakarya in Turkey, it was found that the knowledge levels on Tuberculosis of family physicians were not at the desired levels and that they needed training programs to increase their awareness and to ensure that accurate approaches were adopted."
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Dear associate editor
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2. With respect to the authors, It is recommended that new achievements in disease protection and prevention be listed in a table.
Kindest Regards

**REFEREE**: EIC | **Revision (0)** 16 May 2020

Dear Author,

Your article is reviewed by the reviewers carefully. According to their comments, this document needs minor revision. Please follow their comments as requested.

Thanks.

OPEN PEER REVIEW

Revision (1)

## Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

**Dear Editor and Referees,**

First of all, I would like to thank you very much for your interest, interest and valuable comments for my article I wrote. Your valuable ideas will be a light to me in the development of my articles. The sentences I prepared for the changes you want are as follows.

Best regards...

**Reviewers' Comments**

**Reviewer 1**

1. In the study in question, the duration of waiting patients in the waiting rooms of patients receiving tuberculosis treatment and their use of protective masks, their approach to breastfeeding of the child with pulmonary tuberculosis, the type and evaluation of the BCG vaccine, the type of mask to be used, lung tuberculosis questions about the initial treatment protocol were asked and there were serious differences between the information they provided. It was emphasized that the education received in the medical faculty is not sufficient and that the in-service trainings should continue.
2. Quick diagnostic kit: Tests demonstrating M. Tuberculosis complex and RIF resistance in less than two hours with semi-quantitative, real-time polymerase chain reaction method directly from patient material.
3. Because the tuberculosis bacillus is less than 5 microns and is rapidly spreading in the air, the environment in which a tuberculosis bacillus carrier comes in contact becomes infected. In order to protect against particles spreading rapidly in the environment in question, N95 enabled mask, which is required for breathing isolation, should be used.
4. In Turkey began to be defined as tuberculosis incidence density of 2005. Tuberculosis incidence was recorded as 29.4 in the population of 68 million in 2005. Over the

years, the incidence of tuberculosis has decreased compared to the rate of population growth. Only in 2014, the number of cases remained the same compared to the previous year.In Turkey, on the other hand, according to 2018 data, 11.786 cases were detected in the population of the country, which was 82 million.

**Reviewer 2**

1. The article was translated by Turkey Academic Translation.

2. Table 1: Measures to protect health workers from tuberculosis

| The measures to be taken to protect healthcare employees against tuberculosis and to raise awareness should be as follows: |
| --- |
| ➢ Health managers should be responsible for ensuring absolute participation in the training of infection control committees for health professionals.<br>➢ Healthcare staff should be given adequate information with qualified studies.<br>➢ Compliance with respiratory isolation must be ensured in high-risk areas.<br>➢ Personal protective equipment must be present completely at any point where healthcare is provided.<br>➢ Rapid diagnostic kits (Tests demonstrating M. Tuberculosis complex and RIF resistance in less than two hours with semi-quantitative, real-time polymerase chain reaction method directly from patient material) should be disseminated, tests should be applied during the triage in emergency services, and the patient should be taken to clinics according to the test result. |

**Associate Editor's Comments:**

**Associate Editor 1:**

1. In the study in question, the duration of waiting patients in the waiting rooms of patients receiving tuberculosis treatment and their use of protective masks, their approach to breastfeeding of the child with pulmonary tuberculosis, the type and evaluation of the BCG vaccine, the type of mask to be used, lung tuberculosis

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**Dear associate editor**

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**EIC Decision:**

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previous year.In Turkey, on the other hand, according to 2018 data, 11.786 cases were detected in the population of the country, which was 82 million.

**Dear Dr**

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**OPEN PEER REVIEW**

**Revision (1)**

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

**REFEREE**: Reviewer | **Revision** (1) — 31 May 2020

Dear AE,
The article is well revised.
Thanks.

**REFEREE**: Reviewer | **Revision** (1) — 2 Jun 2020

Dear AE,
The article is accepted for publication after another good edition.
Thanks.

**Masoud Salehi**: Associate Editor | **Revision** (1) — 3 Jun 2020

Dear EIC,
The article is accepted for publication after another good edition.
Thanks.

**REFEREE**: EIC | **Revision** (1) — 3 Jun 2020

Dear Author,
The document is reviewed carefully by the reviewers. According to their comments and your revisions as requested, this manuscript is accepted.
Thanks.