Journal of Comprehensive Pediatrics
Volume 15 · Issue 1 · e138666

OPEN PEER REVIEW

Assessing the Effectiveness of the Combined Apgar Scoring System in Predicting the Short-Term Outcomes of Newborns

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SUBMITTED	REVISED	ACCEPTED	DOI
28 Jun 2023	11 Sep 2023	7 Oct 2023	10.5812/jcp-138666

About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

3 comments · 20 Aug 2023 – 23 Aug 2023

Sadrettin Ekmen Reviewer

MINOR REVISION 20 Aug 2023

Dear editor
Thank you for giving me the opportunity to review this article.
Although I find the subject of the study interesting and important, it has some shortcomings.
1. As we know, APGAR score, nutrition, hospitalization, mortality, and morbidity are not independent of the infant's gestational age. Therefore, it is not appropriate to evaluate term and preterm infants in the same study population. Objective results can only be obtained by comparing these results within the same gestational week and risk-factor groups, or by performing subgroup analyses at specific gestational age intervals, such as 25-28 weeks, 29-32 weeks, and 33-36 weeks.
In the Discussion section, the comparison with other studies states that, in the Amman study, gestational age at birth and birth weight affect the length of hospital stay, whereas in the authors' own study, the combined APGAR score affects the length of stay.

Were gestational age at birth and birth weight examined separately in this study? This situation needs to be clarified.

Associate Editor

MAJOR REVISION 20 Aug 2023

Dear EIC,
Thanks to the authors and appreciation to the researchers. The manuscript presents valuable research. But some revisions are needed.
ABSTRACT:
1- The study design should be mentioned in the first line of the methods section of the ABSTRACT.
2- A summary of the statistical analysis results should be mentioned in the results section of the ABSTRACT.

Editor-in-Chief

MAJOR REVISION 23 Aug 2023

Dear Author,
Thank you for submitting the article. It needs some revision. Please revise it based on the reviewers' and AE's comments.

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Thanks for reading and reviewing this manuscript. In the following, we will respond to each and every comment.

Reviewer 1: inclusion and exclusion criteria should be mentioned more completely , in inclusion criteria the exact gestational age (weeks) and the explanation of major anomalies should be added.

Keywords must be checked by Mesh

"sixteen babies were excluded from the study due to exclusion criteria " is not meaning full, how many were excluded according to each exclusion criteria

Based on which study the proper sample size was determined ?

It has pointed to many people who were present at the site of delivery but it is not clear that who was responsible to record Conventional and Combined Apgar scores for this study

The text has lots of grammatical errors which needs to be revised by some one expert in English.

Most of the references are old, the manuscript should be revised based on new references. Especially in discussion section comparative studies should be UpToDate.

In order to present the results ,tables and figures are necessary , that was absent in this work, demographics of the study population, the results of conventional and combined- Apgar scoring system , and also Logistic Regression model should be used to adjust the results for gestational age, birth weight and the requirement for resuscitation in the delivery room. All of the mentioned titles need a separate table.

Reply to Reviewer 1:

1. All live births of any gestational age without major anomalies(Any anomalies that requires repair surgery to survive including esophageal and other gastrointestinal tract atresia, diaphragmatic hernia, known life threatening congenital heart disease)
2. Key words: Apgar score, intensive care, neonatal
3. Highlighted
4. Based on a pilot study with 50 samples, the sensitivity rate was calculated to be 85%.
5. As mentioned in the manuscript, combined Apgar score is reviewed again and corrected by neonatologist according to the information contained in the medical reports.
6. The text revised by some one expert in English.

7. No new related articles were found in our searches.
8. Done and highlighted.

Reviewer 2: Thank you for giving me the opportunity to review this article.

Although I find the subject of the study interesting and important, it has some shortcomings.

1. As we know, APGAR score, nutrition, hospitalization, mortality and morbidity are not independent of the week of the baby. Therefore, it is not appropriate to evaluate term and preterm infants in the same study population. Objective results can only be obtained by comparing these results within the same week and risk factors, or by performing subgroup analyzes at certain week intervals such as 25-28 weeks, 29-32,33-36.

In the Discussion section, when compared with other studies, it is stated in the Amman study that week of birth and birth weight affect the length of stay in hospital, but in their own study, the combined apgar score affects the length of stay.

Was the week of birth and birth weight examined separately in this study? This situation needs to be clarified.

Reply to Reviewer 2:

1. Done and highlighted.

Associate Editor:

1- Study design should be mentioned in first line of method section of ABSTRACT

2-Summary of Statistical analysis results should be mention in result section of ABSTRACT.

Reply to Associate Editor 1:

1. Done and highlighted
2. Done and highlighted

2 Revision 1

3 comments · 13 Sep 2023 – 7 Oct 2023

Sadrettin Ekmen Reviewer

ACCEPT 13 Sep 2023

Since it is understood that the authors have made the necessary edits in line with our criticisms, it is appropriate for publication.

Associate Editor

ACCEPT 7 Oct 2023

Dear EIC,
The great effort in improving the manuscript is highly appreciated. The subject of the manuscript is very important.
The authors have addressed all the comments. Now, it is acceptable.

Editor-in-Chief

ACCEPT 7 Oct 2023

Dear Author,
Thank you for paying attention and responding to the reviewer's comments.