

Review of: "The Outcomes of Emergency Admissions and Associated Factors Among Children Admitted to the Pediatric Emergency Unit at Selected Public Hospitals in Addis Ababa, Ethiopia — A Retrospective Cross-Sectional Study"

Anna Yaffee¹

¹ Emory University

Potential competing interests: No potential competing interests to declare.

Overall, a well-written and well-conducted study that updates the current landscape of understanding of health in pediatric emergency patients in Addis Ababa, Ethiopia. These findings can be useful for educational and policy-level changes as pediatric emergency medicine grows as a specialty in Ethiopia. I have several questions and comments that are specified in the detailed comments below that would be nice to see addressed in the final product:

- How were hospitals “randomly” selected? Please describe in the methods.
- Source population stated as “children who were admitted and randomly selected for the pediatric emergency unit of selected public hospitals.” Please refine this - were the children randomly selected for participation in the study, or do you mean the randomly selected hospitals? Right now, it reads as children were randomly admitted to the PED, which is not likely what was meant. Please also describe how you used the data from patients in the pediatric ED vs. those admitted to the hospital - why did you choose to include admitted patients as well?
- Data processing: Cite the Epi-data and SPSS programs used.
- Section 4.1: You state “This study was undertaken among 303 children from 1 month to 15 years old who were admitted to the pediatrics emergency department/unit for medical record document review, with a 100% response rate (coverage).” Since this was a chart review and not a survey, there is no need to put “response rate.”
- Results: Include (n,%) with all %s or ns in the text.
- Table 2: The final line is ED length of stay but doesn't have a title in the far left column; please add.
- Discussion, second paragraph: Why are you comparing this to Italy and Singapore? The most useful comparison is to prior data in Ethiopia or worldwide data in LMIC. I'd try to compare to worldwide data rather than choosing specific non-comparable country-level data. The comparisons to Tanzania and Nigeria are at least geographically closer, although unclear about comparability.
- Discussion section - Would love to see more general comments in the discussion about your findings and what these mean for pediatric emergency care in Ethiopia, rather than all the comparisons and conjectures regarding why there are differences. What does your study add to the general understanding that we do not know from other studies? Need to expand on this.

- Recommendations - Should be based solely on your outcomes and results. For example, not sure where the provision of UpToDate as a resource came from, as there is no specific mention of a poor quality in the provider knowledge base.