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Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	Ms_JAMMR_128519
Title of the Manuscript:	Unveiling Trends: A 5-year Analysis of Non- Emergency Visits to the Emergency Department Amidst Primary Care Challenges in the USA and Canada
Type of the Article	Original Research Article

PART 1: Comments

	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
<p>Please write a few sentences regarding the importance of this manuscript for the scientific community. A minimum of 3-4 sentences may be required for this part.</p>	<p>This manuscript provides critical insights into the impact of socio-demographic factors and primary care accessibility on emergency department (ED) utilization trends over five years in the U.S. and Canada. By addressing the challenges of low-acuity ED visits, which contribute to overcrowding and prolonged wait times, the study offers valuable evidence for optimizing healthcare resource allocation and improving system efficiency.</p> <p>Its findings highlight disparities in ED usage based on age, sex, and race, shedding light on areas where healthcare access and policies could be enhanced to reduce the strain on emergency services. This research is essential for informing public health strategies and fostering equitable healthcare delivery.</p>	
<p>Is the title of the article suitable? (If not please suggest an alternative title)</p>	<p>The title of the article, "Unveiling Trends: A 5-year Analysis of Non-Emergency Visits to the Emergency Department Amidst Primary Care Challenges in the USA and Canada," is descriptive and captures the main focus of the study. However, it can be made more concise and aligned with the research scope.</p> <p>Suggested Alternative Title: "Trends in Non-Emergency Emergency Department Visits: A 5-Year Analysis of Socio-Demographics and Primary Care Access in the USA and Canada"</p> <p>This alternative maintains the key elements of the study while improving clarity and focus. It emphasizes the core themes of the research, including trends, socio-demographics, and primary care challenges.</p>	

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<p>Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.</p>	<p>The abstract provides a comprehensive overview of the study, including its background, aims, methodology, key findings, and conclusion. However, there are areas where it can be improved for clarity, completeness, and alignment with typical abstract structures. Here are my suggestions:</p> <p>Suggested Additions: Specificity in Objectives: While the objectives are outlined, including the exact research questions or hypotheses in concise terms could provide better clarity. For instance, explicitly state that the study examines how socio-demographic factors correlate with ED visits and how primary care accessibility impacts these trends.</p> <p>Detailed Results: Include more precise statistical outcomes (e.g., exact correlation coefficients, chi-square test results) to strengthen the abstract's summary of findings.</p> <p>Policy Implications: Highlighting how the findings could guide healthcare policy changes or resource allocation strategies would enhance the relevance of the study.</p> <p>Limitations or Future Directions: Briefly mention the limitations or areas for further research to give a balanced view.</p> <p>Suggested Deletions: Technical Jargon: Phrases like "CTAS IV-V" and "Triage Levels 4-5" may not be immediately clear to all readers. Simplifying or briefly explaining these terms can make the abstract more accessible.</p> <p>Redundant Information: Some background information, such as the generalized impact of ED overcrowding, can be trimmed to focus more on study-specific findings.</p> <p>Revised Abstract Suggestion: This study analyzes trends in non-emergency visits to emergency departments (EDs) in the USA and Canada over five years, focusing on the impact of socio-demographic factors and primary care accessibility. Using datasets from CIHI (Canada) and NCHS (USA), it identifies disparities in ED utilization across age, sex, and race, as well as the effects of the COVID-19 pandemic on visit frequencies. Results reveal significant correlations between age and low-acuity visits, with females visiting more frequently in Canada and males in the USA. Pandemic-related changes led to a reduction in low-acuity visits by approximately 3.6% in the USA and 3.8% in Canada. The study underscores the need for policy interventions to enhance primary care access and reduce ED overcrowding. Further research is recommended to explore systemic factors influencing healthcare-seeking behavior.</p> <p>This revised abstract balances comprehensiveness with conciseness and aligns better with the typical structure of scientific abstracts.</p>	
<p>Is the manuscript scientifically, correct? Please write here.</p>	<p>The manuscript appears to be scientifically sound, as it is based on robust datasets from reputable sources (CIHI and NCHS) and employs appropriate methodologies for the research objectives. Key statistical methods, such as chi-square tests and correlation analyses, are applied to assess relationships between socio-demographic factors and emergency department (ED) utilization trends. The findings are presented logically, and the manuscript addresses a relevant healthcare issue with significant implications for policy and practice.</p> <p>However, some areas need closer attention to ensure complete scientific rigor:</p> <p>Strengths: Clear Research Objectives: The manuscript addresses specific and relevant questions about non-emergency ED visits, socio-demographics, and primary care challenges.</p>	

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	<p>Data Sources: It uses comprehensive and credible datasets (CIHI and NCHS), which enhance the validity and generalizability of the findings.</p> <p>Statistical Rigor: The use of statistical tests (e.g., chi-square, correlation coefficients) is appropriate for the study objectives.</p> <p>Contextual Relevance: It discusses the impact of COVID-19, a timely and critical factor, on healthcare utilization trends.</p> <p>Potential Areas for Improvement: Detailed Statistical Reporting: While results are presented, some statistical details (e.g., p-values, effect sizes) are either missing or not adequately highlighted. Including these would strengthen the credibility of the findings.</p> <p>Comparison of Systems: The manuscript could benefit from a clearer discussion of differences in triage systems between Canada and the USA, which might affect comparability.</p> <p>Clarity on Methodological Limitations: The manuscript acknowledges limitations, but it should explicitly address potential biases in the datasets, such as the absence of race-based data in Canadian sources.</p> <p>Discussion of Causality: The study uses a cross-sectional design, which limits the ability to infer causality. This limitation should be emphasized more clearly.</p> <p>Consistency in Terminology: Technical terms like "CTAS IV-V" and "Triage Levels 4-5" could be briefly explained for clarity and accessibility to a broader audience.</p> <p>Conclusion: The manuscript is scientifically correct but could benefit from enhancements in the statistical reporting, discussion of systemic differences, and clarification of limitations. Addressing these points would further validate the findings and improve the overall quality of the research.</p>	
<p>Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.</p>	<p>The references in the manuscript appear relevant and sufficiently recent, with many citations from the last five years, including studies from 2018 to 2023. These references provide a solid foundation for the research, covering key topics such as emergency department utilization, socio-demographic disparities, and the impact of primary care accessibility. However, there are areas where additional references could enhance the depth and comprehensiveness of the study.</p> <p>Suggestions for Improvement: Recent Pandemic Impact Studies: Include more studies focusing on the impact of COVID-19 on healthcare access and emergency department usage globally to provide broader context. For example: Hartnett, K. P., et al. (2020). "Impact of the COVID-19 Pandemic on Emergency Department Visits." MMWR Morb Mortal Wkly Rep. Triage System Comparisons: Include references that compare Canadian Triage and Acuity Scale (CTAS) and the Emergency Severity Index (ESI) in the USA to explain methodological differences:</p>	

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	<p>Socioeconomic Disparities in Healthcare Utilization: Add references that delve into how socioeconomic factors influence emergency department utilization:</p> <p>Zuckerman, S., et al. (2021). "Access to Care: The Role of Disparities in Emergency Department Visits." Health Affairs. Primary Care and Emergency Department Utilization: Include studies on how access to primary care impacts ED utilization patterns, such as:</p> <p>Conclusion: The references in the manuscript are adequate, but incorporating additional studies on pandemic impacts, triage system comparisons, socioeconomic disparities, and primary care utilization could further enhance the depth and scholarly rigor of the manuscript. These additions would also strengthen the study's relevance to current healthcare challenges.</p>	
<p>Is the language/English quality of the article suitable for scholarly communications?</p>	<p>The language and English quality of the article are generally suitable for scholarly communication. The manuscript employs formal and academic language, appropriate for its target audience. However, there are areas where improvements can enhance clarity, precision, and readability:</p> <p>Strengths: Formal Tone: The manuscript maintains a scholarly tone throughout, adhering to the conventions of academic writing.</p> <p>Structure and Organization: The sections are logically structured, with clear headings and subheadings that guide the reader through the study.</p> <p>Technical Vocabulary: The use of field-specific terms demonstrates the author's expertise and aligns with scholarly standards.</p> <p>Areas for Improvement: Sentence Structure: Some sentences are overly long and complex, which could be simplified for better readability. Breaking down ideas into shorter, more concise sentences will improve comprehension.</p> <p>Clarity and Consistency: Terms like "CTAS IV-V" and "Triage Levels 4-5" are used without sufficient explanation. Adding brief definitions or context would make the manuscript more accessible to a broader scholarly audience.</p> <p>Grammar and Syntax: Minor grammatical issues, such as misplaced modifiers and verb agreement errors, need attention. For example: "The findings offer a starting point to address ED over-utilization for low triage visit dispositions and allocation of healthcare resources" could be revised for smoother readability.</p> <p>Avoiding Redundancy: Repetition of ideas, especially in the introduction and discussion sections, can be reduced to streamline the narrative.</p> <p>Abstract and Conclusion: These sections could be polished further to ensure they succinctly and effectively summarize the study's key findings and implications.</p> <p>Suggestions for Improvement: Employ a professional language editing service to ensure grammatical accuracy and enhance the flow of ideas. Use simpler sentence structures where possible, especially for conveying complex ideas, to improve readability without sacrificing depth.</p>	

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	<p>Conclusion: The language is generally appropriate for scholarly communication but would benefit from minor revisions to improve clarity, precision, and fluency. These changes would make the manuscript more engaging and accessible to its academic audience.</p>	
<p><u>Optional/General</u> comments</p>	<p>Relevance of the Study:</p> <p>The manuscript addresses an important and timely issue, especially considering the impact of the COVID-19 pandemic on healthcare systems. The focus on socio-demographic disparities and primary care challenges in emergency department utilization is particularly relevant for policymakers and healthcare providers.</p> <p>Clarity of Objectives and Research Questions: The objectives and research questions are well-defined. However, a more detailed explanation of how the findings contribute to existing literature or fill research gaps would strengthen the manuscript.</p> <p>Figures and Tables: The inclusion of tables and figures enhances the presentation of findings, but ensuring they are self-explanatory with clear legends and labels would make them more effective.</p> <p>Policy Implications: While the discussion section highlights implications for healthcare systems, providing specific recommendations for policymakers or stakeholders would add practical value to the manuscript.</p> <p>Future Research Directions: The manuscript could benefit from expanding the section on areas for future research. Suggestions such as the integration of telehealth and pre-hospital triage systems or exploring the role of insurance coverage in ED utilization could be included.</p> <p>Audience Accessibility: Consider briefly explaining technical terms and methodologies to ensure the article appeals to a broader scholarly audience beyond specialists in emergency medicine.</p> <p>Summary:</p> <p>This manuscript has the potential to make a significant contribution to the field. Addressing the above comments will improve its clarity, impact, and utility for both researchers and practitioners.</p> <p>The manuscript is scientifically sound, addressing a relevant issue with appropriate methodology and data sources.</p> <p>The findings are meaningful and have practical implications for healthcare policy and system improvement.</p> <p>While the manuscript is generally well-written, there are areas that could benefit from minor revisions, including improvements in statistical reporting, clearer explanations of certain terms, and refinement of the language for better clarity and accessibility.</p> <p>Further elaboration on certain sections, such as policy implications and future research directions, would enhance the manuscript's impact.</p> <p>Once these minor revisions are addressed, the manuscript could be suitable for publication.</p>	

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PART 2:

	Reviewer's comment	Author's comment <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

Reviewer Details:

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