



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2013_IJTDH_6809
Title of the Manuscript:	Bloodstream infections and malaria as causes of fever among adult medical patients at a referral hospital in Malawi
Type of the Article	Research Paper

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

	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>
<u>Compulsory</u> REVISION comments	A very thorough and interesting study conducted in a reference hospital in Malawi looking at malaria and blood stream infections.	
<u>Minor</u> REVISION comments	1. Please explain the rationale for the use of two RDTs (BinaxNow and Paracheck) – why not just one RDT? 2. Table 3 – reword the title “Number of isolates that tested susceptible in relation to the number tested”. 3. Please explain whether meningitis or non-meningitis breakpoints were used for Strep pneumoniae isolates	1. The first choice of an RDT was BinaxNow which distinguishes P. falciparum and non-P-falciparum malaria (all study patients had P. falciparum malaria; data not presented in the manuscript). While we conducted the study at Kamuzu Central Hospital the Ministry of Health of Malawi recommended the ParacheckRDT as one of the RDTs to be possibly implemented in Malawi. That is why the authors included this second RDT. 2. Authors agree and changed the title of Table 3 in the manuscript. 3. In general non-meningitis breakpoints based on CLSI standards were applied for <i>Streptococcus pneumoniae</i> isolates, however the four strains which we have tested had all MIC <0,06 mg/L i.e they also met the meningitis breakpoint.



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<u>Optional/General</u> comments		
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