



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2014_IJTDH_10778
Title of the Manuscript:	Assessing the Performance Characteristics of the “CareStart™ Malaria HRP2 pf (CAT NO: G0141, ACCESSBIO)” Rapid Diagnostic Test for Asymptomatic Malaria in Mutengene-Cameroon
Type of the Article	Original Research Article

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 (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)
Compulsory REVISION comments	The study design justifies the objectives of the study This is a good study and well presented.	THANK YOU
Minor REVISION comments	Line 55-56; please do provide reference. Line 61-63 - You could consider this reference (James Ameh, Nelson Ekeh, Pussam Linga, Zirra Mangoro, Peter Akeredolu, Rakiya Muhammad Ahmad, Shuaibu Hudu, and Asiya Umar Imam (2012). <u>Laboratory diagnosis of malaria: comparing Giemsa stained thick blood films with rapid diagnostic test (RDT) in an endemic setting in North West Nigeria. Journal of Medical Laboratory and Diagnosis</u>, DOI: 10.5897/JMLD 11.027) Line 90 - It will be really appreciated if you could provide the number of children that were excluded as a result of not returning the consent forms. If you add this figure with the recruited participants, you get the total that was given the consent forms. Line 65 – 69 - In your abstract, two objectives for the study were very cleared but at the last paragraph of your introduction, you focused on only one of the objectives. This is in contrast with the abstract. Line 149 – “Out of the 406 pupils examined by microscopy, 386 pupils were again examined using the CareStart™ 150 RDT” Any explanation for the remaining 20 pupils that were not examined using RDT.	Cheesbrough 2010 has been cited here (for lines 55 -56) Line 61-63 correction has been done. Line 90 and line 149. The school in which the research was carried out was C.S Mutengene. It is made up of a nursery section and a primary section. The nursery section was excluded in the study because most of the children were less than five years. The primary section that was used in the study had a population of about 480 pupils. So 500 consent forms were printed and distributed to the pupils through the head-teacher and class teachers. 406 parents accepted that their children should participate in the study. Seventy four (74) pupils did not participate in the study because their parents returned unsigned forms, indicated ‘refused’ or ‘no’ or did not return the forms at all. Among the 406 pupils who participated in the study, 306 pupils cooperated well and blood from the finger prick was collected and used for both microscopy and RDT. The RDT test for 20 pupils was not done because the pupils were not cooperating after blood had been collected for microscopy. The much crying by the pupils and struggle to free the finger made us to let the pupils go. As such, we did not collect blood for RDT from these 20 pupils. Line 65-69 the correction has been done.
Optional/General comments		