# **Peer Review File**

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### <mark>Reviewer A</mark>

Examining the reflective statements of Pediatric and Medicine-Pediatric residents after a DBP rotation based on Leadership, Interdisciplinary, Family-centered, and Equity (LIFE) elements is an interesting way of determining impact of LEND experiences on medical knowledge and perception. This work definitely fills a gap in the literature and could be expanded into future work.

There are some elements of the current submission that could be strengthened to enhance the manuscript impact. Specific suggestions are noted below:

#### <u>Abstract</u>

Comment 1: Gender and program type are listed later in the abstract but not in the beginning. Think about combining all factors that are explored into one section.

Reply 1: We removed gender and program type as variables and retained just the variables that were considered in analysis. Changes in text: pages 3-4 lines 72-90

Comment 2: The order of the abstract could be slightly changed to enhance reader understanding of what is being examined and why. Word count and reading ease seem awkwardly included without much background. Reply 2: Removed word count and reading ease from the abstract (and subsequent manuscript). Reordered the abstract for easier readability. Changes in text: pages 3-4 lines 65-90

Comment 3: Provide short descriptions of the LIFE to give a little more background and why it is important to examine in this population Reply 3: Added description of LIFE, and relevance for pediatrics competencies. Changes in text: page 3 lines 73-76

### **Introduction**

Comment 4: Provide more about the work available describing LIFE assessment and structure. Even though appendix materials are available, provide short descriptions of each either here based on work that has been done or in the measures section.

Reply 4: Add language to elaborate on LIFE, and relevance for pediatrics competencies.

Changes in text: page 5 lines 119-137

Comment 5: Incorporate gender and program type in introduction to support looking at these factors. Why do you feel associations would be found?

Reply 5: We removed reference to gender and program type. We did not find adequate literature to form a cogent hypothesis on either, so chose to focus on the existing variables and hypothesis.

Changes in text: no changes made to introduction section

Comment 6: Define what you mean by "higher degree" (line 166). Try to make that more objective and measurable.

Reply 6: Reworded to reflect Castleberry ratings. Changes in text: page 7 line 165-173

Comment 7: To what extent did the residents have experience with writing (creative or technical) in their past training? Is it possible this could be a covariate that should be controlled for in this study? If so, perhaps add to the limitations section.

Reply 7: Added to limitations, and as a future direction. Changes in text: page 12 lines 285-287

### <u>Methods</u>

Comment 8: Please provide justification for conducting a linear regression rather than nonparametric correlations. Regressions require more power and the sample size for this study is limited.

Reply 8: After considering reviewer comments regarding the analytic plan, the regression models were removed and the difference in Castleberry ratings were instead tested with Wilcoxon rank-sum tests, the non-parametric corollary to an independent samples t-test. This may better address issues with the distribution of Castleberry ratings (i.e., skewness and kurtosis values) and this specific critique.

Changes in text: Please see the updated data analysis section on page 8 lines 194-203

Comment 9: The research questions are often written as if the team is rather exploring differences in LIFE reflection based on gender, program type, etc. If this is the case, t-test and nonparametric difference analyses (chi-square, etc.) would be most appropriate.

Reply 9: Please see reply to comment 8, though regressing a continuous outcome on a dichotomous predictor subsumes an independent samples t-test (the test statistic and its associated p-value are the same values that would be obtained by conducting an independent samples t-test).

Changes in text: Please see the updated data analysis section on page 8 lines 194-203

Comment 10: Was LIFE part of the curriculum? Did residents hear about these throughout their rotation?

Reply 10: Yes, LIFE and LEND were in an introductory video that all trainees are

required to view at the start of their rotation. Language inserted to reflect. Changes in text: page 6 lines 151-152

### <mark>Reviewer B</mark>

The paper details a study examining the effect of COVID-19 pandemic on medical students reflections on training.

Comment 1: As the paper stands, I have trouble understanding what the learning was hoped to be/is from conducting this study. I think the analysis of medical students reflective journals is an interesting concept but am not sure of what to take away from this paper.

Reply 1: We studied residents' reflective papers in this study. Added language to show that the core LIFE precepts are important for the DBP required rotation and maps onto MCH competencies which are core to DBP. Our study hopes to show feasibility of a reflective approach and analysis, with take away being that it can identify gaps in perception that can be addressed through pedagogical or experiential learning before or during the rotation for subsequent residents. Changes in text: pages 4-5, 11-13 lines 100-137, 270-281, 288-300

Comment 2: The introduction is a bit confusing, and I found myself lost in it. I would suggest a restructure of the information, potentially starting with the significance of reflective practices (as detailed from line 115) and then narrowing down to the details of medical training, and then the specifics of the program the authors are writing from. Also earlier placed description of the Castleberry rating system would be beneficial (including potentially moving Table 1 up to the intro, or at least making reference to it there). Reply 2: Makes sense, will rearrange for clarity Changes in text: pages 4-6 lines 100-150

Comment 3: I would also appreciate more clear links to impact of the study. For example the aim regarding reflection dependent on rotation being late or early what might a difference here mean for better training doctors? Reply 3: Added language to clarify possibility of timing of rotation and results. And implications for reflection and training. Changes in text: page 10 lines 245-248

Comment 4: I am unsure on the point of the aim regarding word count/readability and reflection. Again, what would the findings here mean for training/teaching reflection for medical students? Reply 4: Agree. Removed. Changes in text: pages 8-9 lines 186-224

### Methods/Results:

Comment 5: I am a bit confused about the presentation of the regression results as it reads as though four analyses were conducted per LIFE component (which confuses interpretation of the data).

Reply 5: Please see reply to comment 8. There were 8 tests run. One for each of the four components of the LIFE framework for each of the two predictors of interest (pre/post COVID, early/late in rotation).

Changes in text: Please see the updated data analysis section on page 8 lines 194-203 to see if this helps clarify this concern.

# **Discussion**:

Comment 6: The results are interpreted appropriately and thoughtful suggestions are provided. For me, the why of the study is still missing. I'm not sure what the impact of this study is. Though the authors offer suggestions for future studies, this seems to be based more on limitations of the current study rather than building on the findings presented here.

Reply 6: Added language to indicate value of reflection in medical education. Also, reflective writing captures thoughts not available in closed ended surveys and is self-improving exercise for trainees. Important when interdisciplinary experiences and DBP again MCH

Changes in text: pages 11-12 lines 274-281, 288-300

Comment 7: The authors list as a limitation that this is a baseline study with no comparison group, but isn't the comparison pre vs post covid and early vs late training? I'm not sure of the context of this limitation and what the authors would suggest instead.

Reply 7: Removed this as limitation. Changes in text: pages 11-12 lines 282-285

Comment 8: The conclusion does not seem to fit with the paper. I would want a conclusion to sum up the learnings and what this might mean for practice. With all the allusion to thematic analysis I do wonder why it was not done for this paper.

Reply 8: Thematic language removed from conclusion. Reworded to reflect the paper.

Changes in text: page 13 lines 293-300