

Peer Review File

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Review Comments:

Application of microlecture teaching methods in standardized residency training during COVID-19 in Wuhan: a randomized, controlled study

This is an RCT of an educational intervention for? medical students in a neurology clerkship in Wuhan China. The intervention is an online microlecture course vs a traditional classroom-based course.

1. Is the context a medical school or residency / post graduate training?

Scope this is about neurology teaching and not paediatrics- is it relevant to your journal

Reply 1: The context is standardized residency training students in our hospital affiliated to medical school, during the COVID-19 period in Wuhan.

Change in the text: We change the title to more accuracy to describe the scope.

2.The study is from Wuhan- we should support our colleagues in the Wuhan health service for their pioneering role with Covid. The standard of written English is not acceptable for publication but this could easily be resolved by using an editing service

Reply 2: Thank you very much.

Change in the text: We look the AME editing service for helping us editing the written English.

3. Is the trial registered? There is no evidence for this despite the Consort statement.

The study has ethics approval and says consent was obtained from students- however 100% acceptance would suggest this may not have been fully voluntary. Simalry it would appear no students dropped out but no Prisma chart is available.

Reply 3: The trial is registered in our hospital. The consent was obtained from students 100%, because data that does not cooperate is discarded because it cannot be used
Change in the text: We added the registered number in the paper and the registered file in the system. This study was approved by the ethics committee of Renmin Hospital, Wuhan University(2018-X-016) and the study is not blinding. We obtained written informed consent from each participants.

4.Method There is no clearly stated aim to the study

Reply 4: Thank you for your reminding.

Change in the text: We added the aim of the study in line 33-35.

5.Are the tools used validated?

Blinding? Not for teachers, the subjects were not blinded.

Reply 5: The tools (WeChat) is used very popular in the world, and the content is the mature evaluation scales which had also been demonstrated in our previous studies as we cite in reference 14.The study is not blinding.

Change in the text: We added the and the study is not blinding.in line 93-94.

6.The other issues seem resonable using a CASP RCT checklist Issues

Reply 6: Okay .

Change in the text: We change it.

7.The teaching intervention seems to be completely online? I don't think it is educationally sound to do a neurology clerkship not based around seeing patients.

Miller's pyramid shows that knowledge acquisition is only the first step in developing competence, in this case competence to deal with patients with neurological conditions. It is unclear if this study relates just to a "taught course" element of a clerkship? Neither arms appear to get a clinical component?

Reply 7: Thank you for your attention. The microlecture teaching method, as a product

of mobile Internet, it has many advantages, such as short teaching time, situational resource composition, prominent theme, specific content, diversified communication, timely feedback, strong pertinence, etc., and its effect is more obvious than that of traditional teaching during the epidemic period.

Change in the text: The microlecture teaching method is a new method, we will continue to improve the method to more suitable to get a clinical component.

8. Stats significance is set at 5% but appear to be 25+ variables so it should be set significance at 1% or do a Bonneferoni calculation?

Reply 8: Thank you for your reminding. You are right. Before the study, we set 5% as a value to calculate the sample size using G power.

Change in the text: 5% is a very popular value. If the value <1%, it will also be <5%.

9. The limitations of the study are not adequately described – the biggest being that the teachers were not blind to the intervention- are these the same teachers that evaluated the students' performance.? If so this would seriously undermine the credibility of the findings

Reply 9: Yes, you are right. Thank you for your reminding. These were not the same teachers that evaluated the students' performance.

Change in the text: We add the limitations part in the end of the paper in line 339-341.