Reviewer's report

Title: Predictive ability of an early diagnostic guess in patients presenting chest pain

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Reviewer: Rudi Bruyninckx

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Rudi Bruyninckx
8.11.2009

Peer review:
Predictive Ability of an early Diagnostic Guess in Patients Presenting Chest Pain.

This article is much better than the previous one, and nearly ready to be published.
Thank you for responding to all the questions, I do appreciate your answers.

I still have some minor and discretionary comments and suggestions.

1) I really appreciate that you read my article and used it as reference, but please do not exaggerate referring to it. Otherwise, I will have to declare having competing interests because your are referring to me too much. ;-)

2) Page 2 and others: I do not exactly know how BMC edits ‘95%CI’, you will have to check this, I prefer ‘51.0% (95%CI: 64.5% - 52.5%)’ or ‘51% (64.5 to 52.5).’

3) Page 3, introduction: I suggest to skip references 4 and 5 here, and use them only in the discussion section.

4) Page 3, methods, design: ‘...thoracic pain in primary care [4]: this is not reference 4, but I suppose reference 6.

5) Page 4, methods, general practitioners: ‘Fifty-eight general…one common code’
This is a result for me, I suggest to place it there.

6) Page 4, methods, reference diagnosis: ‘for the few patients..’
I suggest to skip ‘few’, otherwise it is a result.

7) Page 5, methods, reference diagnosis: ‘Quality control’
How was this control performed? I did not find results of this control in the results section.
So skip it here, or give information on the results.

8) Page 5, methods, reference diagnosis: ‘One contested final..’
I suggest to skip ‘one’, otherwise it is a result

9) Page 5, methods, reference diagnosis: ‘..coronary heart disease..’
‘Coronary heart disease’ is unclear, replace this by ‘stable or unstable…..acute angina’ like you use it in table 2

10) Page 5, methods, reference diagnosis. The subheading ‘Reference diagnosis’ is too restrictive, maybe you can replace it by ‘diagnosis’ or something else.

11) Page 6, results. ‘they did not take a guess for 185 patients’.
Did I understand well that they also did not make an ‘unspecific diagnosis’ from table 2?

12) Page 6, results. ‘After history taking….of 8%’
This is a very interesting item. I understand that this is the result from earlier published work.

You cannot give it as a result here, but I suggest to place this important information in the discussion section-previous studies. So you also refer to your earlier publication.

13) Page 7, discussion, overview of results. ‘Physicians synthesize ..observations’.
I suggest to skip it here and combine it with ‘previous studies’. In this way you do not repeat.

See also comment 1.

14) Page 8, discussion, strength and weakness: ‘the second limitation…is not certain’.
You mention that as a weakness, for me using an independent panel (p 5, methods, reference diagnosis) is not perfect but a very acceptable solution and a strength of this study.

‘..diagnostic assessment after a follow-up period by an independent panel of experts, representing a “delayed type” cross-sectional study. This may not be perfect but can be the most acceptable solution.


15) Page 8, discussion, previous studies: this part of the article has to be rewritten, taking earlier remarks into consideration.

16) Page 8, discussion. I suggest to repeat the conclusion of the abstract.

17) Figure 1.
a) The evolution of the diagnosis from ‘first minutes’ to ‘end of encounter’ is very interesting. Problem is that you can not use it without explaining this in the method section. See also remark 12.
b) I had to study the bar graphs before understanding them. I suggest to skip the ‘early undiagnosed causes’ and only use the ‘correct early diagnostic guess’, this will make it more easy to understand.

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests