Reviewer's report

**Title:** Tracking Family Medicine Graduates. Whom do they see, what services do they provide and where do they go?

**Version:** 1  **Date:** 2 September 2011

**Reviewer:** Maria Mathews

**Reviewer's report:**

1. Is the question posed by the authors well defined?

A specific study question is not defined. Rather three study objectives are stated: to 1) describe the patient population served by FM graduates, 2) describe the services provided and workload of FM graduates and 3) examine the impact of a policy introduced to influence the distribution of new FM graduates in the province.

2. Are the methods appropriate and well described?

The sources of administrative data are well described. However the rationale for selecting various indicators and comparison groups are not well presented. For example, the analysis of the first objective (patient population) seems limited to only ADGs and SES. Why not include patient’s age and gender? Given the shortage of family physicians in Ontario, are new grads practicing differently than their older counterparts? While the comparison of males and females is interesting, it’s unfortunate that more indicators describing the make up of each practice and the style of work could not be reported.

It is also not clear why the three cohorts were selected (why the specific cut-off years). In some analyses, it appears that the three cohorts are being compared, whereas in others, it appears that University of Toronto FM graduates are being compared to all other family physicians in Ontario. No other information is given on this comparison group (for example, all other physicians, or other graduates from other FM programs in Ontario between 1993 and 2003)?

The analytic strategy is not clear – were only t-tests used? This seems odd given that most of the variables were categorical data. A number of paragraphs describe results as if they were different even though, as the authors themselves state, there were no statistically significant differences found.

The authors also use the “term” trend to compare the three cohorts and refer to “changes over time”. I’m not certain this is the appropriate terminology to use given that this is a cross sectional study comparing three groups at one time (rather than the same cohort at three different intervals).

Some of the results presented do not match the stated objectives, (for example the results the proportion of all University of Toronto made up of Family Medicine graduates).
The information of LIHNs (figure 3) is difficult to understand for a reader who is not familiar with Ontario’s health system and geography.

3. Are the data sound?
The source data are sound. Limitations of the administrative data clearly discussed.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?
   It appears to.

5. Are the discussion and conclusions well balanced and adequately supported by the data?
   Yes although the conclusion really outlines areas for further future research rather than making conclusions from the data presented.

6. Are limitations of the work clearly stated?
   Yes

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished?
   Yes

8. Do the title and abstract accurately convey what has been found?
   No – the title is fine but the conclusion appears to be about the methods not the study objectives.

9. Is the writing acceptable?
   Style wise - yes. Content wise - clarifications are needed.

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

**Quality of written English:** Acceptable

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**
I declare that I have no competing interests.