Reviewer's report

Title: Patient Preferences for Notification of Normal Laboratory Test Results: A Report from the ASIPS Collaborative

Version: 1 Date: 29 December 2004

Reviewer: Anton Kuzel

Reviewer's report:

General

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

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Discretionary Revisions (which the author can choose to ignore)

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Comments on first reading the manuscript:

Report asserts that few primary care practices have system for notifying patients of lab results (abstract) â€“ wonder about the basis for this assertion.

Sampling strategy well conceived â€“ like the attention to emerging themes in guiding further samples, and sampling to saturation of categories.

Interview structure seems sound â€“ starting with stories of recent experiences and shifting to more abstract ideas (preferences).

Use of the term â€œinterrater reliabilityâ€ (page 8) and applying a score to this construct is not consistent with qualitative inquiry assumptions. Consensus is sometimes the goal, but not always, and the rate of consensus is not an indicator of the quality of the shared work of coding. Rather, the extent to which individual assumptions are surfaced, and the degree to which power (among the coders) is shared, is more important.

The statement that findings were consistent with other studies does not so much validate the methods and results (page 8), as it does validate the tacit theories related to patient preferences for handling lab results in primary care.

The results are presented as a single group because no differences were discerned regarding level of education of participants. How about other ways that the participants might have been different? (page 9)

It is surprising that almost half of the respondents had had lab results left on an answering machine (page 19) â€“ HIPAA has been around for awhile!
The fact that none of them had ever experienced a web-based system, or an automated phone system, is a significant limitation of drawing inferences from this study. It would seem that market research in which people could try out different types of notification systems would be needed to feel more secure about actual patient preferences. For example, one of our residencies uses an automated phone system (by which patients punch in a PIN and hear their own doctor giving them their test results and the significance of same), and the physicians in the group feel that their patients like the convenience and timeliness, as well as the personalization of having their own physician tell them the news. This limitation of the study was the only one that the authors didn’t seem to acknowledge in their discussion. I otherwise feel it was a well designed and executed study that provides some insight into patient preferences re normal lab results.

What next?: Accept after discretionary revisions

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

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests.